

STATE OF IOWA

KIM REYNOLDS, GOVERNOR ADAM GREGG, LT. GOVERNOR

IOWA BOARD OF MEDICINE
MARK BOWDEN, M.P.A., EXECUTIVE DIRECTOR

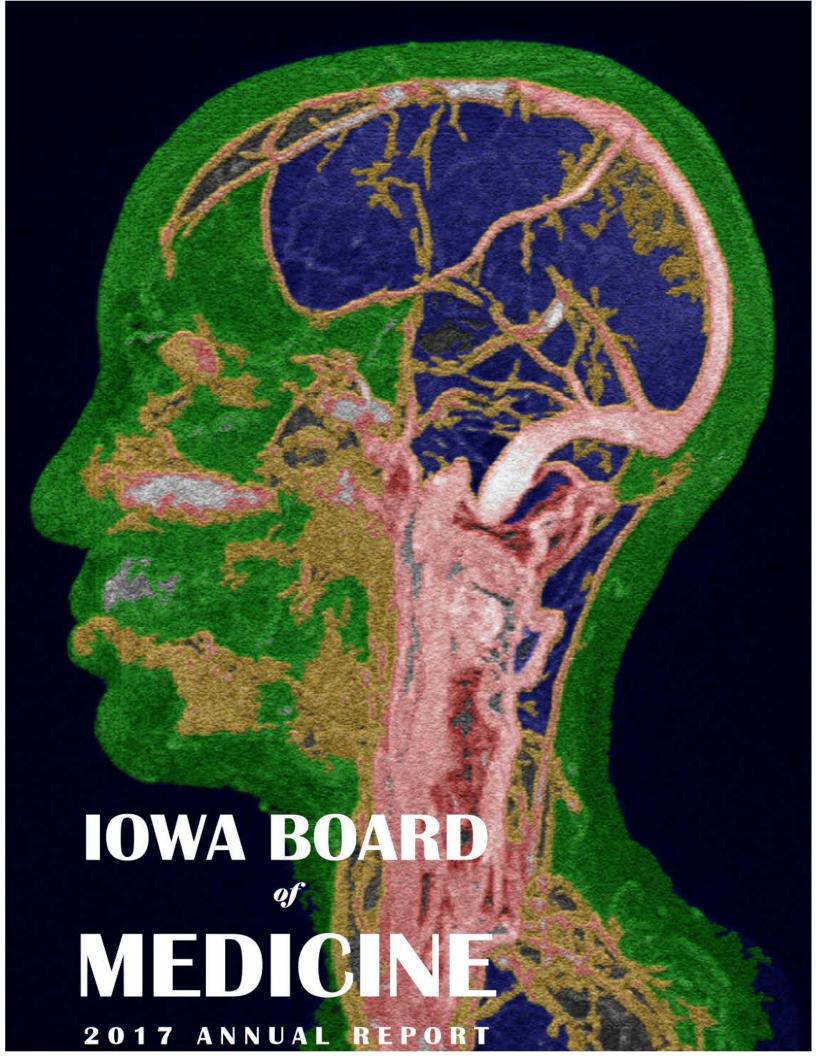
FOR IMMEDIATE RELEASE: April 6, 2018 CONTACT: Mark Bowden, (515) 494-8344 or mark.bowden@iowa.gov

Board issues 2017 annual report on licensure, regulatory activities

DES MOINES, IA – The Iowa Board of Medicine has issued its 2017 annual report on the agency's licensure and regulatory activities. In 2017, the Board

- Administered active licenses for 12,417 physicians and 68 licensed acupuncturists.
- Received 661 complaints and mandatory reports and completed reviews or investigations of 663 case files.
- Took 47 public disciplinary actions and voted to issue 76 confidential letters of concerns about licensees' conduct or practice.
- Filed charges against 21 physicians and issued three public consent agreements as a condition for medical licensure.
- Assessed civil penalties totaling \$55,000 involving 11 cases.
- Initiated action to amend five administrative rules and completed a five-year review of the Board's 20 chapters of administrative rules.
- Held seven two-day administrative meetings, seven teleconferences, and one disciplinary hearing.
- Approved four petitions to waive certain requirements for medical licensure and denied two
 petitions for licensure requirement waivers.
- Issued 59 medical licenses to physicians who were qualified to use the expedited licensure process established by the Interstate Medical Licensure Compact.
- Continued a robust educational outreach program to the public and licensees, health care stakeholders, and state and federal government officials.
- Participated in training activities and regulatory discussions offered by the Federation of State Medical Boards and the Administrators in Medicine.

The full report, which includes a summary of all Board actions issued in 2017, is attached. See previous years' reports at http://www.medicalboard.iowa.gov/about_the_board/data.html



ABOUT THE BOARD

The 21st General Assembly created the State Board of Medical Examiners in 1886 to license physicians and regulate the practice of medicine. Initially, the Board issued licenses to several classes of physicians, including medical (M.D.), homeopaths, and eclectics.

The Board did not issue licenses for osteopathic physicians until 1902. In 1921, the Legislature created a separate board to license and regulate osteopaths. In 1963, the Legislature abolished the osteopathic board and redefined the State Board of Medical Examiners, making it a composite board to license allopathic physicians (M.D.s) and osteopathic physicians (D.O.s). In 2007, the board was renamed the Board of Medicine.

Non-physician "public" members have been on the 10-member Board since 1975.

Since 1994, the Board has regulated acupuncturists, first registering them, then licensing them. Over the past 130 years, the Board has directly or indirectly been responsible for licensure or regulation of other health care providers, including nurses, advanced emergency medical technicians, paramedics, and physician assistants. All of these professions are now licensed and regulated by their own boards.

In 2018, legislation was approved to license and regulate genetic counselors under the Board.

In 1996, the Legislature authorized the Board to establish the Iowa Physician Health Committee to administer a program to advocate for and monitor the recovery and rehabilitation of impaired physicians.

In 2015, the Legislature authorized the Board to join the Interstate Medical



IOWA BOARD OF MEDICINE 400 SW Eighth Street, Suite C Des Moines, Iowa 50309-4686

HOURS: 8:00 a.m. to 4:30 p.m., Monday

through Friday

PHONE: (515) 281-5171 FAX: (515) 242-5908 EMAIL: <u>ibm@iowa.gov</u>

WEB: www.medicalboard.iowa.gov

Licensure Compact, which establishes an expedited process for medical licensure in participating states.

The Board regulates the practice of medicine and surgery, acupuncture and genetic counseling under the authority of lowa Code chapters 17A, 147, 147B, 148, 148E, 272C and Section 653 in the lowa Administrative Code.

The Board is charged with enforcing these laws and rules to protect the public from licensees who do not practice medicine and acupuncture within prevailing and acceptable standards of care.

The Board is an Executive Branch agency within the Iowa Department of Public Health. The Board is funded entirely with licensure fees.

BOARD MEMBERS



MEMBERS OF THE BOARD OF MEDICINE, MAY 1, 2017, TO APRIL 30, 2018. (front row from left) Mary Jo Romanco, Pleasantville; Teresa Garman, Ames; KellyAnn Light-McGroary, M.D., Solon; Nicole Gilg Gachiani, M.D., Des Moines; and Diane Cortese, Urbandale. (back row from left) Kyle Ulveling, M.D., Carroll; Warren Gall, M.D., Dubuque; Ronald Kolegraff, M.D., Milford; Charles Wadle, D.O., West Des Moines; and Brian Wilson, D.O., Spencer.

The 10-member Board of Medicine is composed of seven physicians (five M.D.s and two D.O.s) and three non-physicians who represent the public. Members are appointed by the Governor and confirmed by a two-thirds' majority vote in the lowa Senate for a full three-year term or to complete the unexpired term of a member who resigned. Members receive a per diem and expenses, and can serve up to nine years. The Board annually elects a chairperson, vice chairperson, and secretary and is organized into four standing committees, each with five members: Executive, Licensure, Monitoring, and Screening. The Board must be gender balanced and no more than five members can be from the same political party. Physician members must be actively engaged in the practice or the instruction of medicine for a period of five years just preceding the member's appointment, the last two of which must be in lowa. Public members have been a part of the Board's composition since 1975.

| 2017 MEMBERS & OFFICERS | APPOINTED | TERM EXPIRES |
|--|------------|----------------|
| Kyle Ulveling, M.D., Carroll, chair | 2015 | April 30, 2018 |
| KellyAnn Light-McGroary, M.D., Solon, vice chair | 2016 | April 30, 2019 |
| Diane Cortese, Urbandale, secretary | 2014, 2016 | April 30, 2019 |
| Warren Gall, M.D., Solon | 2017 | April 30, 2020 |
| Teresa Garman, Ames | 2017 | April 30, 2020 |
| Nicole Gilg Gachiani, M.D., Des Moines | 2016 | April 30, 2019 |
| Ronald Kolegraff, M.D., Milford | 2016 | April 30, 2019 |
| Mary Jo Romanco, Pleasantville | 2015 | April 30, 2018 |
| Charles Wadle, D.O., West Des Moines | 2015 | April 30, 2018 |
| Brian Wilson, D.O., Spencer | 2017 | April 30, 2020 |

Physicians and non-physicians interested in serving on the Board can complete an online application at https://openup.iowa.gov/

EXECUTIVE DIRECTOR'S REPORT

The Iowa Board of Medicine takes seriously its fundamental responsibility to serve the citizens of Iowa by ensuring that physicians and acupuncturists are qualified to practice and that they are adhering to the laws, rules and standards that regulate their practices.

In 2017, the Board:

- Administered active licenses for 12,417 physicians and 68 licensed acupuncturists.
- Received 661 complaints and mandatory reports and completed reviews or investigations of 663 case files.
- Took 47 public disciplinary actions and voted to issue 76 confidential letters of concerns about licensees' conduct or practice.
- Filed charges against 21 physicians and issued three public consent agreements as a condition for medical licensure.
- Assessed civil penalties totaling \$55,000 involving 11 cases.
- Initiated action to amend five administrative rules and completed a five-year review of the Board's 20 chapters of administrative rules.
- Held seven two-day administrative meetings, seven teleconferences, and one disciplinary hearing.
- Issued 59 medical licenses to physicians who were qualified to use the expedited licensure process established by the Interstate Medical Licensure Compact.
- Continued a robust educational outreach program to the public and licensees, health care stakeholders, and state and federal government officials.
- Participated in training activities and regulatory discussions offered by the Federation of State Medical Boards and the Administrators in Medicine.

The Board places great emphasis on completing timely, fair and complete investigations that result in appropriate action. Concurrently, the Board provides assistance and guidance to licensees through the adoption of rules and regular communications on disciplinary actions and a variety of issues relating to their practices.

In addition, the Board remains a strong supporter of the Iowa Physician Health Program, which facilitates the intervention and rehabilitation of physicians who have mental, physical or chemical dependency issues that, if left untreated or not monitored, could impair their ability to practice safely.

This brief report is a statistical tabulation of the Board's work during 2017. Behind these numbers are the hard work of a devoted and professional staff and the exceptional public service of dedicated Board members.

The Board has a long history of transparency regarding its licensure, disciplinary and regulatory work, making all public documents easily available on the Board's website. In addition, the agency has provided annual reports such as this one for several decades. Do you want to know more about the Board? Please visit us online at www.medicalboard.iowa.gov or contact me.

APRIL 1, 2018

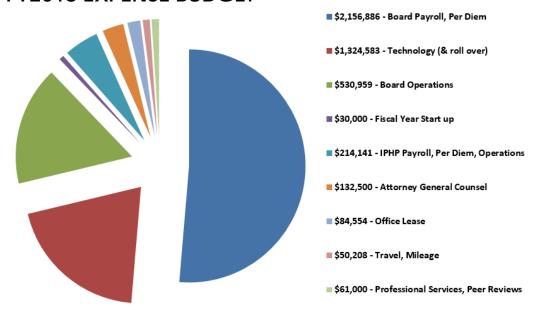
MARK E. BOWDEN, M.P.A.

Runh & Drewler

EXECUTIVE DIRECTOR, IOWA BOARD OF MEDICINE

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FY2018 EXPENSE BUDGET



BOARD OF MEDICINE'S EXPENSE BUDGET FOR FISCAL YEAR 2018 (JULY 1, 2017, THROUGH JUNE 30, 2018): \$4,497,612. The FY2018 expense budget includes roll-over funds for operations and to cover ongoing expenses for programming the Board's database and to fund technology upgrades. The Board's anticipated revenue from licensure fees in FY2018 is \$3,268,855. The Board is funded entirely with licensure fees, which have not been increased since FY2007. In FY2014, the Board reduced fees.

2017 MEETING SCHEDULE

MEETINGS &
TELECONFERENCES
January 19
February 9-10
March 9
April 13-14
April 28
May 15
June 1-2
July 20-21
August 10
September 14-15
October 26-27
November 9
December 15-16



ON THE BOARD'S WEBSITE: www.medicalboard.iowa.gov

- Agendas, minutes of all meetings in the past nine years
- Profiles on all Iowa-licensed physicians and acupuncturists
- Forms for online-filing of complaints with the Board
- Regulatory information for licensees and applicants
- Annual reports since 1978
- Press releases and documents on all public orders

To receive press releases, agendas and other Board news, sign up at: https://public.govdelivery.com/accounts/IACIO/subscriber/new?preferences=true

ADMINISTRATIVE RULES

The Board of Medicine's administrative rules, which have the weight of law, are found in Section 653 of the Iowa Administrative Code. Before the Board can adopt a new rule or amend an existing rule, the intended action item must be published in the Iowa Administrative Bulletin and reviewed at a public hearing. The proposed change can also be subject to review by the Governor's Office and by the Administrative Rules Review Committee. In addition, the public can petition the Board to adopt, amend or repeal an administrative rule.

RULEMAKING INITIATED IN 2017

CHAPTER 8, FEES – ARC 3464C. The amendments recognize an existing online transaction fee and existing service fees associated with licensure through the Interstate Medical Licensure Compact. The amendments also update the descriptions of data lists. **INITIATED 07/21/2017 | ADOPTED 10/27/2017 | EFFECTIVE 12/27/2017**

CHAPTER 9, PERMANENT PHYSICIAN LICENSURE – ARC 3587C. The amendments recognize the Interstate Medical Licensure Compact's license process, retire the Board's outdated rule on an lowa-specific expedited licensure process, and addressed a frequent licensure requirement waiver request. The amendments also update language throughout the chapter. INITIATED 07/21/2017 | ADOPTED 12/15/2017 | EFFECTIVE 02/21/2018

CHAPTER 13, STANDARDS OF PRACTICE AND PRINCIPLES OF MEDICAL ETHICS – ARC 3588C. The amendments implement 2017 lowa Acts, Senate File 404, which relates to the use of experimental treatments for patients with terminal illnesses. INITIATED 09/15/2017 | ADOPTED 12/15/2017 | EFFECTIVE 02/21/2018

CHAPTER 13, STANDARDS OF PRACTICE AND PRINCIPLES OF MEDICAL ETHICS – ARC 3589C. The amendments implement 2017 lowa Acts, House File 577, which relates to the diagnosis and treatment of patients with tick-borne diseases. INITIATED 09/15/2017 | ADOPTED 12/15/2017 | EFFECTIVE 02/21/2018

CHAPTER 21, PHYSICIAN SUPERVISION OF A PHYSICIAN ASSISTANT – ARC 3264C. The amendments establish that a physician is ineligible to supervise a physician assistant if the supervising physician does not have a written supervisory agreement with the physician assistant. INITIATED 04/28/2017 | ADOPTED 07/21/2017 | EFFECTIVE 09/20/2017

COMPREHENSIVE REVIEW OF RULES, 2012-2017

Pursuant to Iowa Code 17A.7(2), the Board of Medicine conducted a comprehensive and ongoing review of the Board's administrative rules, found under Section 653 of the Iowa Administrative Code. This summary report, which was approved by the Board on July 21, 2017, captures all adopted amendments between January 1, 2012, and June 30, 2017, and identifies potential amendments by topic that may be initiated for adoption by the Board in FY2018 (July 1, 2017, through June 30, 2018). The report is available on the Board's website: www.medicalboard.iowa.gov

IOWA PHYSICIAN HEALTH PROGRAM

The Iowa Physician Health Program (IPHP) was established in 1996 to support physicians

who self-report mental health issues, physical disabilities or substance use disorders. The advocacy and confidential monitoring program is administered by the Iowa Physician Health Committee, which is appointed by the Board of Medicine. Participants sign contracts agreeing to adhere to the strict guidelines. The program's overarching goals are supporting physicians who seek the program's assistance,



protecting the public by carefully monitoring physicians with diagnosed impairments that may affect their abilities to practice, and maintaining credibility with the Board and the public by accountability and responsible application of authority. The committee and program are defined in Iowa Administrative Code 653 Chapter 14. Committee members receive a per diem and expenses.

The committee held four meetings in 2016 and met with 27 program participants. Staff members conducted field visits with 16 participants. The program's budget of \$213,141 in FY2018 is funded entirely with licensure fees. Licensees do not pay additionally to participate in the program, but they are responsible for all costs associated with drug screening, therapy, treatment and so forth.

Staff members of the Board manage the program and meet with the participants in the field to ensure compliance. The committee's co-chairs and legal counsel provide guidance on case issues. **Members of the committee in 2017:**

- Lester Yen, M.D., West Des Moines, co-chair
- Raymond Harre, M.D., Davenport, co-chair
- Eric Boyum, M.D., Oskaloosa
- Kim Brangoccio, LMFT, CEAP, IAADC, Booneville
- Jeanine Freeman, J.D., Des Moines
- Jeff Kerber, Ph.D., West Des Moines, licensed marriage and family therapist
- Sasha Khosravi, D.O., Grimes
- Jeffrey Means, M.Div., Ph.D., Des Moines
- Mark Bowden, M.P.A., executive director, Board of Medicine

Amy Van Maanen, L.B.S.W., is the program's coordinator and Emily Zalasky, L.B.S.W., is the program's case manager. Sara Scott, an Assistant Iowa Attorney General, provides legal counsel for the program and the committee.

| IOWA PHYSICIAN | HEA | LTH | PROGRAM | http://iphp. | .iowa. | gov/ |
|--------------------------------------|---------|---------|----------------------|--------------|--------|------|
| (TOTALS ON DECEMBER 31) | 2016 | 2017 | (PARTICIPANTS' DIAGN | IOSES) | 2016 | 2017 |
| Active Participants | 50 | 45 | Substance use | | 13 | 11 |
| In review for eligibility | 8 | 13 | Mental health | | 8 | 7 |
| Physicians | 47 | 49 | Physical conditi | on | 2 | 1 |
| Resident physicians | 11 | 8 | Multiple diagnos | ses | 27 | 25 |
| Discharged Noticed for violations | 37 5 | 37 4 | | | | |

LICENSURE

| LANUARY A RECEMBER OF | 0045 | 0010 | 0045 |
|--|--|---|--|
| JANUARY 1-DECEMBER 31 | 2015 | 2016 | 2017 |
| Active M.D. licenses | 10,090 | 10,289 | 10,393 |
| Active D.O. licenses | 1,881 | 1,947 | 2,024 |
| TOTAL | 11,971 | 12,236 | 12,417 |
| | | | |
| Active M.D.s with Iowa work address | 5,455 | 5,382 | 5,340 |
| Active D.O.s with lowa work address | 1,375 | 1,407 | 1,413 |
| TOTAL | 6,830 | 6,789 | 6,753 |
| | , | · | , |
| PERMANENT PHYSICIAN LICENSE | | | |
| Issued by endorsement | 496 | 581 | 574 |
| Issued by expedited endorsement | 182 | 227 | 95 |
| Issued by examination | 288 | 285 | 245 |
| Licensed through Interstate Compact | - | - | 59 |
| TOTAL | 966 | 1,093 | 973 |
| TOTAL | 300 | 1,033 | 313 |
| Application denied | 0 | 0 | 0 |
| Application denied Confidential letter about application | 0 63 | 0 80 | 0 24 |
| Confidential letter about application | 63 | 80 | 24 |
| | 00.070 | 40.4 | 505 |
| (EFFECTIVE 7/1/15) Relinquished | 33,379 | 494 | 565 |
| Renewed | 5,342 | 5,466 | 5,468 |
| Went inactive | 793 | 852 | 855 |
| Reinstated | 85 | 73 | 89 |
| | | | |
| ADMINISTRATIVE MEDICINE LICENSE | | | |
| (EFFECTIVE 7/1/16) Issued | | 11 | 9 |
| Renewed | | 0 | 3 |
| | | | |
| ACTIVE | | 11 | 18 |
| | | 11 | 18 |
| | | 11 | 18 |
| ACTIVE | 290 | 306 | 300 |
| RESIDENT PHYSICIAN LICENSE | 290 | | |
| RESIDENT PHYSICIAN LICENSE Issued | | 306 | 300 |
| RESIDENT PHYSICIAN LICENSE Issued Renewed | 2 | 306 6 | 300 10 |
| RESIDENT PHYSICIAN LICENSE Issued Renewed ACTIVE | 2 | 306 6 | 300 10 |
| RESIDENT PHYSICIAN LICENSE Issued Renewed ACTIVE SPECIAL PHYSICIAN LICENSE | 2 756 | 306 6 762 | 300 10 806 |
| RESIDENT PHYSICIAN LICENSE Issued Renewed ACTIVE SPECIAL PHYSICIAN LICENSE Issued | 2 756 4 | 306 6 762 | 300 10 806 7 |
| RESIDENT PHYSICIAN LICENSE Issued Renewed ACTIVE SPECIAL PHYSICIAN LICENSE Issued Renewed Renewed | 756 4 22 | 306 6 762 1 23 | 300 10 806 7 22 |
| RESIDENT PHYSICIAN LICENSE Issued Renewed ACTIVE SPECIAL PHYSICIAN LICENSE Issued Renewed Went inactive | 2 756 4 22 3 | 306 6 762 1 23 0 | 300 10 806 7 22 1 |
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IOWA MEDICAL LICENSES

PERMANENT – A license to practice in any setting in lowa. It's a two-year license that can be renewed.

ADMINISTRATIVE – A license for a non-clinical, administrative position in medicine not involving patient care.

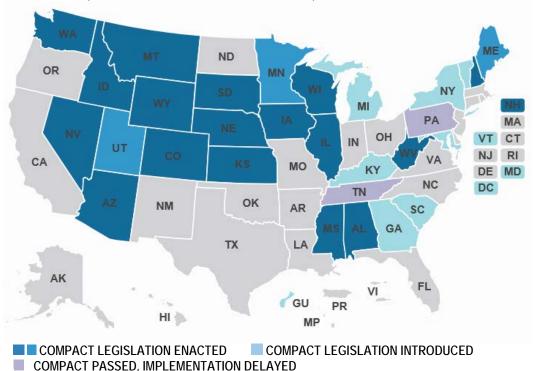
RESIDENT – A license to practice in a Board-approved resident training program in lowa. The license is issued for the duration of the training program.

SPECIAL – A license to practice by a highly specialized physician who is a medical college faculty member at the University of lowa or Des Moines University who does not meet qualifications for permanent licensure.

TEMPORARY – A license authorizing a physician to practice in a short-term Board-approved practice setting such as medical director of a camp.

INTERSTATE MEDICAL LICENSURE COMPACT

(Data shown as of April 1, 2018. Source: Interstate Medical Licensure Compact Commission)



The Interstate Medical Licensure Compact creates a new pathway to expedite the licensing of physicians seeking to practice medicine in multiple states. States participating in the Compact agree to work together in new ways to significantly streamline the licensing process and to strengthen public protection by sharing investigative and disciplinary information. More than 1,200 physicians have used expedited licensure process since it began in April 2017.

The Compact has been enacted in 22 states and the U.S. territory of Guam, and the enabling legislation was active in eight states and the District of Columbia at the start of 2018. Iowa was the 10th state to enact the law, which is presented in Iowa Code chapter 147B. More than 100 Iowa medical licenses have been issued to physicians licensed in other states who are qualified to use the expedited process, and more than 60 Iowa-licensed physicians have used the process to be licensed in other states.

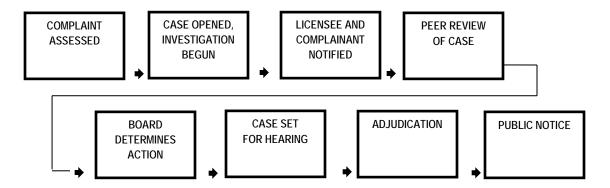
To be eligible for expedited licensure, physicians must possess a full and unrestricted license to practice medicine in a Compact state; possess specialty certification or be in possession of a time unlimited specialty certificate; have no discipline on any state medical license; have no discipline related to controlled substances; not be under investigation by any licensing or law enforcement agency; have passed each component/step of the USMLE or COMLEX (or equivalent) within three attempts; and have successfully completed a graduate medical education program. Approximately 80 percent of physicians licensed in the U.S. meet the criteria for licensure through the Compact.

A commission oversees the administration of the Compact. Iowa's commissioners are Mary Jo Romanco, a public member of the Board, and Mark Bowden, the Board's executive director, who serves as chair of the commission. More information about the Interstate Medical Licensure Compact is available at www.imlcc.org

ENFORCEMENT

| JANUARY 1 TO DECEMBER 31 | 2014 | 2015 | 2016 | 2017 |
|--|------|------|------|------|
| COMPLAINTS, MANDATORY REPORTS | | | | |
| Complaints | 497 | 577 | 449 | 443 |
| Reports | 150 | 135 | 196 | 218 |
| TOTAL | 647 | 712 | 645 | 661 |
| | | | 0.10 | |
| Complaint files closed | NA | 588 | 474 | 441 |
| Report files closed | NA | 146 | 184 | 222 |
| TOTAL | 726 | 734 | 661 | 663 |
| | | | | |
| Complaint investigations open on 12/31 | NA | 367 | 358 | 344 |
| Report investigations open on 12/31 | NA | 68 | 73 | 88 |
| TOTAL | 584 | 435 | 431 | 432 |
| | | | | |
| PUBLIC CHARGES & CONSENT AGREEMENTS | 40 | 22 | 24 | 24 |
| DICCIDI INADV ACTIONO | | | | |
| DISCIPLINARY ACTIONS License revocation/surrender | 9 | 3 | 2 | 7 |
| License suspension | 1 | 1 | 0 | 4 |
| License probation | 7 | 12 | 8 | 4 |
| Civil penalty | 16 | 17 | 17 | 11 |
| Public citation and warning | 26 | 21 | 23 | 17 |
| Practice restriction | 7 | 7 | 10 | 4 |
| TOTAL FORMAL (PUBLIC) ACTIONS | 66 | 61 | 62 | 47 |
| , , | | | | |
| Confidential letter about practice or conduct | 123 | 105 | 89 | 76 |
| L'annual de Daniel de 20/04 | 404 | 400 | 0.7 | 0.4 |
| Licensees monitored by the Board on 12/31 | 191 | 196 | 67 | 61 |
| | | | | • |
| | | | | |

OVERVIEW OF COMPETENCY COMPLAINT PROCESS



ENFORCEMENT SUMMARY: 2017 CHARGES, AGREEMENTS

In 2017, the Board of Medicine filed charges against 24 physicians involving issues related to their practices in lowa or related to adverse actions taken against them by another state's medical licensing board. Total charges listed below exceed 24 because some physicians were charged with more than one count. The total charges include three consent agreements as a condition for granting an lowa medical license, publicly recognizing adverse actions taken against applicants by another state's licensing board.

CHARGES:

Discipline by another licensing authority* - 6 Felony conviction - 1

Fraud in representations as to skill or ability - 2 Improper management of medical records - 2 Improper pain management - 3

Inappropriate prescribing - 2

Knowingly making misleading, deceptive, untrue or fraudulent representations in the practice of medicine and surgery - 3

Maintaining pre-signed prescriptions - 1

Practice harmful or detrimental to the public – 1

Professional incompetency - 5

Sexual misconduct - 4

Unethical or unprofessional conduct - 5

Use of untruthful or improbable statements in advertisements - 1

Violation of Board order - 1

Violation of a confidential evaluation order - 1 Violation of an Iowa Physician Health Program contract - 1

Wrong surgical procedure - 1

CONSENT AGREEMENT FOR LICENSURE:

(Agreement puts public on notice of action against applicant by lowa's or another state's medical licensing board)
Improperly managed medical records - 1
Used patient's insurance to get medications - 1
Substance use while under health contract - 1

OUTCOMES: Complaints are most often handled in one of three ways

- 1. NO ACTION. This is the result when no violation of laws, rules or medical care standards has occurred. The licensee is notified and the information is kept on file.
- 2. INFORMAL ACTION. There may be no violation of laws, rules or medical care standards that warrants public action, but the Board is nonetheless concerned about some aspect of the licensee's conduct or performance. The Board will issue a confidential letter of education or warning cautioning the licensee against repeating similar conduct or practice.
- 3. PUBLIC CHARGES FILED. The Board determines there is a violation of laws, rules or medical care standards and files public charges and a disciplinary hearing is scheduled.

(*Actions were taken against these six physicians in other states for these issues: Conduct, practice, or condition which impairs, or may impair, ability to safely and skillfully practice medicine - 1; criminal arrest - 1; dishonesty - 1; discipline by another licensing authority - 1; failure to maintain records - 1; failure to notify the board of a physical or mental illness or condition that impacts the ability to perform a medical service with reasonable skill and safety to patients - 1; failure to report a criminal conviction - 1; felony conviction - 1; habitual or excessive use or abuse of alcohol, a habit-forming drug, or a controlled substance - 1; incompetence - 1; negligence or failure to exercise due care - 1; prescribing, dispensing, or furnishing dangerous drugs without appropriate prior examination and a medical indication - 1; prescribing, distributing, or giving controlled substances to oneself or family members - 1; professional misconduct - 1; unprofessional conduct - 1; violation of a board order, rule or regulation - 3)

ENFORCEMENT SUMMARY: 2017 INFORMAL ACTIONS

When the Board of Medicine determines that probable cause does not exist to take formal public disciplinary action the Board may send a confidential non-disciplinary letter to a licensee expressing concerns and requesting that a licensee take corrective action. At meetings in 2017, the Board voted to issue 76 confidential letters addressing the following competency and professionalism concerns.

FEBRUARY 9-10 MEETING - 14 LETTERS

- 1. care of patient with cervical fracture
- 2. sent threatening or harassing text messages to a minor following the purchase of a cell phone
- 3-5. care of patient who suffered a heart attack
- 6. failed to finish medical records in a timely manner
- 7. failed to promptly respond to an audit of mandatory continuing medical education
- 8. care of patient with metastatic prostate cancer, including patient selection and communication of the risks of treatment
- 9. care of patient who suffered a stroke
- 10. surgical treatment of patient who underwent cardiovascular surgery
- 11. care of patient with lung cancer
- 12. care of patient with serious infection, and improper amendment of the medical records
- 13. failed to communicate abnormal test results to patient in a timely manner
- 14. refilled a medication that was contraindicated

APRIL 13-14 MEETING - 11 LETTERS

- 1. care of patients who experienced fetal distress and a uterine rupture during labor and delivery
- 2-4. failed to submit or failed to promptly submit proof of completion of mandatory continuing medical education
- 5. concerns that a physician ordered medical products that were not FDA approved from unlicensed suppliers and provided inaccurate information to the Board
- 6. failed to finish medical records in a timely manner
- 7. concerns about anti-coagulation management for patient
- 8. restriction on cardiac surgery privileges due to excessive infection rates
- 9. concerns that a physician misread a CT angiogram resulting in unnecessary surgery 10. prescribed injectable Benadryl to patient and failed to maintain appropriate physician-patient boundaries
- 11. concerns that a physician may have engaged in a romantic relationship with a former patient/coworker and provided false information to the Board

JUNE 1-2 MEETING – 11 LETTERS

- 1-2. failed to provide appropriate supervision to a physician assistant
- 3. care of obstetrics patients who experienced difficulties during labor and delivery

- 4. concerns that a physician was convicted of domestic abuse following a physical altercation with spouse
- 5. failed to report two professional liability settlements
- 6. failed to perform an appropriate prostatectomy and penile implant surgery on patient
- 7. failed to finish medical records in a timely manner
- 8. failed to provide appropriate anti-coagulation therapy to patient
- 9. care of patient who experienced severe alcohol withdrawal
- 10. provided pre-signed prescriptions to a co-worker who obtained medications fraudulently
- 11. admonished by another state licensing board for misinterpreting an MRI and failing to diagnose a thoracic tumor

JULY 20-21 MEETING - 13 LETTERS

- 1. prescribed pain medications to a physician colleague without performing appropriate examinations and without maintaining appropriate medical records
- 2. engaged in unprofessional conduct while performing neurosurgery on the patient
- 3. prescribed combinations of opioids and benzodiazepines to patients without performing appropriate counseling and documentation
- 4. misrepresented the number of continuing medical education credits completed
- 5. treatment of patients in the emergency department
- 6. concerns that a physician engaged in domestic violence
- 7. failed to provide appropriate postoperative care to patient
- 8. violated hospital policies regarding treatment of patients outside of the clinic setting and medication use, and violated appropriate professional boundaries
- 9. prescribed pain medications to patients and diverted the drugs for own use
- 10. prescribed pain medications to a physician colleague without maintaining appropriate medical records and failed to report the potential substance abuse impairment
- 11. care of patient with anemia
- 12. failed to perform a thorough examination of patient
- 13. disciplined by another state's licensing board for misreading an x-ray

ENFORCEMENT SUMMARY: 2017 INFORMAL ACTIONS

When the Board of Medicine determines that probable cause does not exist to take formal public disciplinary action the Board may send a confidential non-disciplinary letter to a licensee expressing concerns and requesting that a licensee take corrective action. At meetings in 2017, the Board voted to issue 76 confidential letters addressing the following competency and professionalism concerns.

SEPTEMBER 14-15 MEETING – 10 LETTERS

- 1. management of a high-risk pregnancy
- 2. discharged a postoperative patient without performing an appropriate examination and testing
- 3. failed to diagnose a bowel obstruction postoperatively in a timely manner
- 4. hospital privileges terminated due to quality of care concerns
- 5. failed to complete mandatory continuing medical education
- 6. prescribed pain medications and antidepressants to patients for extended periods of time without checking the Iowa Prescription Monitoring Program
- 7. hospital privileges were terminated due to quality of care concerns
- 8. failed to communicate the results of a biopsy to patient in a timely manner resulting in the delayed diagnosis and treatment of recurring kidney cancer 9. convicted of felony fraud after practicing medicine
- in another state without a proper U.S. visa 10. provided an independent medical evaluation that was beyond expertise in a custody dispute and signed the evaluation report without verifying the information contained in the report

OCTOBER 26-27 MEETING - 10 LETTERS

1.performed angioplasty and stent placement on patient without appropriately communicating the risks and benefits of the procedure and alternative treatment options

- 2-3. failed to complete mandatory training for chronic pain management and end-of-life care
- 4. failed to communicate abnormal x-ray results to patient in a timely manner resulting in the delayed diagnosis and treatment of lung cancer
- 5. hospital privileges were terminated due to disruptive behavior and quality care concerns
- 6. care of patient who suffered head trauma
- 7-8. prescribing practices and monitoring of patient who suffered a severe spinal injury
- 9. failed to provide appropriate urological surgery care
- 10. disciplined by another state's licensing board due to poor patient care and poor quality and delinquent medical records

DECEMBER 14-15 MEETING – 7 LETTERS

- 1. prescribing practices and treatment of chronic pain
- 2. care of patient with a dangerously low potassium level
- 3. diagnosis and treatment of children with mental health conditions
- 4. surrendered hospital privileges while under investigation due to concerns about the quality of care and medical documentation
- 5. care of patient with congestive heart failure
- 6. misread an MRI resulting in the delayed diagnosis and treatment of an epidural abscess
- 7. management of patient's anti-coagulation

| CIVIL PENALTIES | | | | | | | |
|-----------------|--------|-----------|----------|----------|----------|----------|----------|
| | | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| TOTAL LICENSEES | | 29 | 16 | 16 | 17 | 17 | 11 |
| | | | | | | | |
| DOLLAR AMOUNT | 1,000 | 3 | 2 | 0 | 2 | 1 | 0 |
| | 2,000 | 1 | 0 | 0 | 0 | 0 | 0 |
| | 2,500 | 6 | 6 | 7 | 1 | 3 | 4 |
| | 3,000 | 0 | 0 | 0 | 1 | 0 | 0 |
| | 5,000 | 5 | 4 | 8 | 7 | 12 | 5 |
| | 7,500 | 4 | 1 | 1 | 2 | 0 | 0 |
| | 10,000 | 11 | 3 | 0 | 4 | 1 | 2 |
| TOTAL PENALTIES | | \$185,000 | \$74,500 | \$65,000 | \$97,500 | \$78,500 | \$55,000 |

The Board may issue an order to discipline a licensee, including imposing a civil penalty (fine) not to exceed \$10,000. Penalties are deposited in the general fund of the State of Iowa. The Board does not benefit from the fines it imposes. The Board is funded with licensure fees. Since 2007, the Board has imposed fines totaling \$1,020,500.

ENFORCEMENT, LICENSURE: 2017 PUBLIC ORDERS

The following are summaries of the Board of Medicine's public orders issued in 2017, including enforcement actions and licensure requirement waivers. The documents for these orders are available at www.medicalboard.iowa.gov:

Abdelrhman, Tamer Altman, Ruben Bertroche, J. Patrick Brokke, James Clark, John Cunard, Robert Darrow, Joseph Jr. Elahi, Foad Feske, William Garrett, Robert Hansen, Catherine Hauser, Richard Hill, Mark Hunt, Jill Hussain, Shahid Iles, Lynette Jacks, Tobin Knapp, David Levin, Avraham Lindaman, Matthew Mendoza, Noli Obamwonyi, Andrew Pandey, Kiran Pithan, Mark Ross, Kelly Saad, Saad A. Sego, James Sepulveda, Mariano Shader, Joseph Standing, Larry

Steele, James Stubbs, Christopher Syed, Salahuddin Szczepanek, Andrzej Vander Ploeg, Kurt Wadhwa, Anupama Warren Gareth Yates, LeRoy Jr.

Tamer Abdelrhman, M.D. License No. MD-44488 Date of order: 07/21/2017

Actions: Issued license: waived requirement in 653 IAC 9.3(1)c(3) – complete continuous progressive postgraduate training in a program approved by the Board. Basis: Board voted on April 14, 2017, to deny waiver, but agreed to leave the waiver petition open to obtain consider additional information. Board reconsidered the petition on July 21, 2017, and granted a waiver based on new information. Dr. Abdelrhman completed a four-year pathway board certification Northwestern University Illinois. He was certified by the American Board of Radiology via an alternative pathway. Board also considered his full and unrestricted medical licensure in Illinois and Wisconsin.

Ruben Altman, M.D. License No. MD-19162 Date of Order: 12/15/2017 Action: Terms of June 6, 2013,

findings of fact, conclusions of law, decision and order terminated. **Basis:** Completed terms of order.

J. Patrick Bertroche, D.O. License No. DO-03220 Date of Order: 07/20/2017

Action: Issued citation and warning; assessed civil penalty; ordered to complete Boardapproved professional ethics program. Basis: Maintaining pre-signed prescriptions.

John P. Clark, D.O. License No. DO-01607 Date of Order: 09/15/2017

Action: Issued citation and warning; voluntary surrendered license. Basis: Unethical or unprofessional conduct.

Robert D. Cunard, M.D. License No. MD-30647 Date of Order: 05/19/2017

Action: Agreement not to prescribe controlled substances. **Basis:** Inappropriate pain management.

Joseph C. Darrow, Jr., M.D. License No. MD-41395 Date of Order: 12/15/2017

Action: Issued citation and warning; assessed civil penalty; ordered to complete neuropsychological testing, attend a program on professional boundaries and establish a worksite monitor. Basis: Sexual misconduct.

James D. Brokke, D.O. License No. DO-03146 Date of Order: 06/02/2017 Action: Voluntarily surrendered license. Basis: Professional incompetency.

Foad Elahi, M.D. License No. MD-39467 Date of Order: 04/14/2017

Action: Issued citation and warning; assessed civil penalty; ordered to complete professional boundaries program. Basis: Sexual harassment; unethical or unprofessional conduct.

William I. Feske, M.D. License No. MD-44106 Date of Order: 01/19/2017 Action: Issued licence and a

Action: Issued licence and a citation and warning. Basis: Action taken by the California and South Dakota medical boards.

Robert E. Garrett, M.D. License No. MD-23090

Action: Probation terminated; still prohibited from prescribing, administering or dispensing controlled substances for the treatment of chronic pain. Basis: Completed terms of probation.

ENFORCEMENT, LICENSURE: 2017 PUBLIC ORDERS

The following are summaries of the Board of Medicine's public orders issued in 2017, including enforcement actions and licensure requirement waivers. The documents for these orders are available at www.medicalboard.iowa.gov

Catherine M. Hansen, D.O. License No. R-11067
Date of Order: 12/15/2017

Action: Issued resident license and citation and warning; assessed civil penalty; ordered to complete ethics program. Basis: Improper management of medical records; violation of patient privacy standards.

Richard L. Hauser, M.D. License No. MD-28230 Date of Order: 11/09/2017

Action: Issued citation and warning; voluntarily surrendered license. Basis: Felony conviction; unethical or unprofessional conduct.

Mark N. Hill, M.D. License No. MD-42053 Date of Order: 12/15/2017

Action: Issued citation and warning; assessed civil penalty; prohibited from practicing in a solo practice in Iowa. Basis: Action taken by the Illinois medical board.

Shahid Hussain, M.D. License No. MD-44487 Date of order: 07/21/2017

Actions: Issued license: waived licensure requirement in 653 IAC 9.3(1)c(3) – complete continuous, progressive graduate training in a program approved by the Board. Basis: Dr. Hussain completed a fouryear pathway to board certification at University of Nebraska Medical Center. He was certified by the American Board of Radiology via an alternative pathway. recognized practice history and full and unrestricted licensure in Nebraska and New York.

Jill M. Hunt, M.D. License No. MD-22152 Date of Order: 12/15/2017

Action: Terminated terms of August 8, 2014, statement of charges and settlement agreement. Basis: Completed terms of probation.

Lynette I. Iles, M.D. License No. MD-30293 Date of Order: 09/15/2017

Action: Issued citation and warning; assessed civil penalty; suspended license; extended probation. Basis: Violation of a Board order.

Tobin E. Jacks, M.D. License No. MD-26026 Date of Order: 09/15/2017

Action: Allowed to prescribe, administer or dispense controlled substances while practicing within the Iowa Department of Corrections. Basis: Complied with terms of reinstatement decision.

David P. Knapp, M.D. License No. MD-28986 Date of Order: 09/15/2017

Action: Voluntarily surrendered license. **Basis:** Health condition which impairs ability to practice with reasonable skill and safety.

Matthew R. Lindaman, D.O. License No. DO-03309 Date of Order: 02/17/2017

Action: Issued citation and warning; assessed civil penalty. **Basis:** Wrong site surgery.

Noli R. Mendoza, D.O. License No. DO-03196

Action: Voluntarily surrendered license. Basis: Knowingly making misleading, deceptive, untrue or fraudulent representations in medical practice.

Avraham Levin, M.D. License No. SP-0219 Date of order: 02/17/2017

Actions: Issued special license; waived special licensure requirement in 653 IAC 10.4(2)f – shall have practiced for five years after postgraduate training. Basis: Dr. Levin worked for four years and seven months outside of postgraduate training and has held temporary or permanent licensure in New York since 2014.

Andrew O. Obamwonyi, M.D. License No. MD-39987 Date of Order: 02/17/2017

Action: Issued citation and warning; assessed civil penalty.

Basis: Failure to respond to or comply with a Board investigation.

Kiran R. Pandey, M.D. License No. MD-43485

Date of Order: 06/02/2017
Action: Issued citation and warning; assessed civil penalty; voluntarily surrendered license.

Basis: Sexual misconduct; unethical or unprofessional conduct; professional incompetency.

Mark A. Pithan, M.D. License No. MD-44690 Date of Order: 10/30/2017

Action: Issued license; issued citation and warning; and referral to the Iowa Physician Health Program. Basis: Action taken by the Colorado medical board.

Kelly D. Ross, M.D. License No. MD-23076 Date of Order: 09/15/2017

Action: Terms of March 6, 2014, order terminated. Basis: Completed terms of order.

ENFORCEMENT, LICENSURE: 2017 PUBLIC ORDERS

The following are summaries of the Board of Medicine's public orders issued in 2017, including enforcement action and licensure requirement waivers. The documents for these orders are available at www.medicalboard.iowa.gov

Saad A. Saad, M.D. License No. MD-39859 Date of Order: 12/15/2017

Action: Issued citation and warning; voluntarily surrendered license. **Basis:** Action taken by the New Jersey medical board.

James W. Sego, D.O. License No. DO-04233 Date of Order: 12/15/2017

Action: Terminated terms of August 30, 2011, consent agreement. Basis: Complied with terms of agreement, including participation in the Iowa Physician Health Program.

Mariano M. Sepulveda, M.D. Date of order: 06/02/2017

Actions: Denied request to waive special licensure requirement in 653 IAC 10.4(2)f – shall have practiced for five years after postgraduate training. Basis: He has one year of practice outside of postgraduate training; does not offer unique contributions to medicine.

Joseph P. Shader, M.D. License No. MD-42131 Date of Order: 06/30/2017

Action: Issued citation and warning; indefinite suspension.

Basis: Violation of a Physician Health Program Contract; violation of a confidential evaluation order.

Larry J. Standing, D.O. License No. MD-02762 Date of Order: 02/17/2017

Action: Issued citation and warning; assessed civil penalty; prohibited from prescribing, administering or dispensing controlled substances for the treatment of chronic pain; ordered to complete medical record keeping course; probation. Basis: Improper pain management.

James O. Steele, M.D. License No. MD-22607 Date of Order: 07/20/2017 Action: Terms of March 6, 2014, order terminated. Basis: Completed terms of order.

Christopher F. Stubbs, M.D. License No. MD-43351 Date of Order: 10/27/2017

Action: Issued citation and warning; suspended license; assessed civil penalty; ordered to complete professional ethics program and amend employment biography; probation. Basis: Unethical or unprofessional conduct; knowingly making misleading, deceptive, untrue or fraudulent representations in medical practice.

Salahuddin Syed, M.D.
License No. MD-37105
Date of Order: 06/30/2017
Action: Terms of April 8, 2016,
Order terminated. Basis:
Completed terms of order.

Gareth J. Warren, M.D. License No. MD-41209 Date of Order: 06/02/2017

Action: Issued citation and warning; fully comply with terms of August 31, 2016, consent agreement issued by New York medical board: if he seeks reinstatement of Iowa license, he agrees that while practicing medicine under Iowa license, he shall have a Board-approved chaperone continually present when treating patients including, but not limited to, patient evaluation, treatment and postevaluation treatment directions: provide the Board written notice at least 90 days prior to seeking reinstatement of his Iowa license. **Basis:** Action taken by the New York board.

Andrzej Szczepanek, M.D. License No. MD-37643 Date of Order: 02/17/2017

Action: Termination of the requirement to practice in a Board-approved practice setting with respect to opioid prescribing; license is returned to its full privileges, free and clear of all restrictions. Basis: Completed terms of order.

Kurt R. Vander Ploeg, M.D. License No. MD-20762 Date of Order: 07/20/2017 Action: Terms of May 15, 2015, Order terminated. Basis: Completed terms of order.

Anupama Wadhwa, M.D. License No. MD-44486 Date of order: 07/21/2017

Actions: Issued license: waived licensure requirement in 653 IAC 9.3(1)c(3) – complete continuous progressive postgraduate training in a program approved by the Board. Basis: Dr. Wadhwa completed a four-year pathway to board certification at University of Louisville in Kentucky. She obtained certification by the American Board of Anesthesia via an alternative pathway. Board also considered and recognized practice history and full and unrestricted licensure Kentucky and California.

LeRoy L. Yates, Jr., M.D. License No. MD-27540 Date of Order: 10/27/2017

Action: Prohibited from practicing medicine under Iowa license at this time. Basis: Evidence which established continued practice of medicine constitutes an immediate danger to the public health, safety, and welfare.

ALTERNATE MEMBERS

Alternate members of the Board of Medicine play an important role in contested case hearings. Up to three alternates can serve on a six-member panel for a hearing when a quorum (six members) of the 10 current members of the Board is not available. Since it was authorized by law in 2008 and implemented in 2009, the Alternate pool is routinely tapped for hearings. Alternates are recommended by the Board, but must be approved by the Governor. An Alternate's term is nine years. Alternates receive a per diem and expenses. Alternates serving in 2017 were:

| ALTERNATE MEMBERS | APPOINTED |
|-------------------------------------|--------------------|
| Carole Frier, D.O., Des Moines | March 25, 2011 |
| Analisa Haberman, D.O., Mason City | August 21, 2012 |
| Bruce Hughes, M.D., Des Moines | March 25, 2011 |
| John Marshall, M.D., Council Bluffs | August 21, 2012 |
| Paul Thurlow, Dubuque | November 14, 2011 |
| Janece Valentine, Fort Dodge | July 8, 2012 |
| Joyce Vista-Wayne, M.D., Clive | September 26, 2013 |
| Allen Zagoren, D.O., Clive | March 19, 2009 |
| | |

| CONTESTED CASE HEARINGS | | | | | | | |
|---------------------------------|------|------|------|------|------|--|--|
| | 2013 | 2014 | 2015 | 2016 | 2017 | | |
| HEARING | 4 | 2 | 2 | 1 | 1 | | |
| HEARING USING ALTERNATES | 3 | 1 | 2 | 1 | 0 | | |
| SETTLED WITHOUT HEARING | 47 | 34 | 23 | 25 | 19 | | |

PEER REVIEWS

In addition to three public members, the Board of Medicine includes seven physicians, representing at most seven specialties. Complaints about Iowa physicians, however, cross the spectrum of specialties, from anesthesiology to urology. Therefore, in competency issues expertise in a given case may not be available on the Board when the case is discussed. If, after a case has been investigated and discussed at the Board level, specialty expert opinion is needed to fairly determine if the standard of care has or has not been met, a formal peer review may be requested. John Olds, M.D., the Board's medical advisor, will recruit physicians to serve on a committee to review a case file, which includes the investigative report, interviews with the complainant, witnesses and the physician involved, and pertinent medical records. The peer reviewers then discuss their findings and determinations amongst themselves and submit a formal report to the Board for consideration. Iowa physicians who are interested in serving as a peer reviewer may contact Dr. Olds at (515) 242-3229. An instruction manual for peer reviewers is available at www.medicalboard.iowa.gov

| PEER REVIEWS | | | | | | |
|--------------|------|------|------|------|------|------|
| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| ORDERED | 9 | 11 | 16 | 12 | 8 | 17 |
| COMPLETED | 9 | 7 | 9 | 13 | 6 | 16 |

| 2016 | State Population: Population ≤ age 21: Primary Care Physicians Total Active Physicians: | 3,134,693 917,763 2,597 6,627 | Total Female Physicians: Total Medical or Osteopathic Students Total Residents | 1, | 051 549 82 |
|--------------------------|--|--|--|-------|------------------|
| | | | | IA | IA Rank |
| | Active Physicians per 100 | 0,000 Population, 2010 | 6 | 211.4 | 43 |
| | Total Active Patient Care | Physicians per 100,0 | 00 Population, 2016 | 186.9 | 46 |
| | Active Primary Care Phys | sicians per 100,000 Po | opulation, 2016 | 82.8 | 35 |
| lowa's | Active Patient Care Prima | ary Care Physicians pe | er 100,000 Population, 2016 | 76.2 | 35 |
| Physician | Active General Surgeons | per 100,000 Population | on, 2016 | 6.9 | 41 |
| Supply | Active Patient Care Gene | eral Surgeons per 100 | 000 Population, 2016 | 6.3 | 35 |
| | Percent Active Female P | hysicians, 2016 | | 31.0% | 32 |
| | Percent of Active Physici | ans who are Internation | nal Medical Graduates, 2016 | 19.0% | 26 |
| | Percentage of Active Phy | sicians Who Are Age | 60 or Older, 2016 | 28.7% | 39 |
| | Students Enrolled in Med | ical or Osteopathic Sc | chool per 100,000 Population, AY 2016-2017 | 49.4 | 10 |
| Undergraduate Medical | Students Enrolled in Pub | lic Medical or Osteopa | athic Schools per 100,000 Population, AY 2016-2017 | 21.2 | 21 |
| Education | Percent Change in Stude | ents Enrolled in Medica | al or Osteopathic Schools (2006-2016) | 7.3% | 42 |
| (UME) | Percent of MD Students | Matriculating from In-S | State, AY 2016-2017 | 68.1% | 21 |
| | Total Residents/Fellows i | n ACGME Programs լ | per 100,000 Population as of 12/31/16 | 28.1 | 25 |
| Graduate Medical | Total Residents/Fellows i | n Primary Care ACGN | ME Programs per 100,000 Population as of 12/31/16 | 11.5 | 21 |
| Education | Percentage of Internation | nal Medical Graduates | in ACGME Programs as of 12/31/16 | 20.4% | 27 |
| (GME) | Ratio of Residents and F | ellows (GME) to Medic | cal Students (UME), AY 2015-2016 | 0.6 | 40 |
| | Percent Change in Resid | ents and Fellows in A | CGME-Accredited Programs, 2006-2016 | 10.4% | 39 |
| | Percent of Physicians Re | tained in State from U | ndergraduate Medical Education, 2016 | 21.8% | 39 |
| | Percent of Physicians Re | tained in State from F | Public Undergraduate Medical Education, 2016 | 30.2% | 39 |
| Retention | Percent of Physicians Re | tained in State from G | raduate Medical Education, 2016 | 35.7% | 44 |
| | Percent of Physicians Re | tained in State from U | ME and GME Combined, 2016 | 60.7% | 34 |

Source: Association of American Medical Colleges, 2017 State Physician Workforce Data Book

IOWA PHYSICIAN WORKFORCE

| IOWA PHYSICIAN WORKFORCE PROFILE - 2016 | ICE PROFILE - 2016 FEMALE | | AGE 60 AN | D OLDER | | |
|--|---------------------------|----------------------|-----------|---------|--------|---------|
| Specialty | Total Active | People per Physician | Number | Percent | Number | Percent |
| All Specialties | 6,627 | 473 | 2,051 | 31.0 | 1,895 | 28.7 |
| Allergy and Immunology | 29 | 108,093 | 10 | 34.5 | * | * |
| Anatomic/Clinical Pathology | 102 | 30,732 | 30 | 29.4 | 45 | 44.1 |
| Anesthesiology | 315 | 9,951 | 64 | 20.3 | 96 | 30.6 |
| Cardiovascular Disease | 154 | 20,355 | 22 | 14.3 | 63 | 40.9 |
| Child and Adolescent Psychiatry** | 52 | 17,649 | 24 | 46.2 | 16 | 30.8 |
| Critical Care Medicine | 79 | 39,680 | 19 | 24.1 | * | * |
| Dermatology | 74 | 42,361 | 30 | 40.5 | 22 | 29.7 |
| Emergency Medicine | 230 | 13,629 | 52 | 22.7 | 65 | 28.6 |
| Endocrinology, Diabetes and Metabolism | 37 | 84,721 | 14 | 37.8 | 12 | 32.4 |
| Family Medicine/General Practice | 1,651 | 1,899 | 609 | 37.0 | 476 | 29.0 |
| Gastroenterology | 78 | 40,188 | 12 | 15.4 | 22 | 28.2 |
| General Surgery | 216 | 14,512 | 33 | 15.3 | 54 | 25.0 |
| Geriatric Medicine*** | 27 | 19,045 | 10 | 37.0 | * | * |
| Hematology and Oncology | 104 | 30,141 | 28 | 26.9 | 33 | 31.7 |
| Infectious Disease | 53 | 59,145 | 20 | 37.7 | 12 | 22.6 |
| Internal Medicine | 571 | 5,490 | 198 | 34.8 | 181 | 31.7 |
| Internal Medicine/Pediatrics | 13 | 241,130 | * | * | * | * |
| Interventional Cardiology | 33 | 94,991 | * | * | * | * |
| Neonatal-Perinatal Medicine | 37 | 84,721 | 14 | 37.8 | * | * |
| Nephrology | 61 | 51,388 | 17 | 27.9 | 16 | 26.2 |
| Neurological Surgery | 36 | 87,075 | * | * | * | * |
| Neurology | 99 | 31,664 | 28 | 28.6 | 46 | 46.5 |
| Neuroradiology | 27 | 116,100 | * | * | * | * |
| Obstetrics and Gynecology | 268 | 11,697 | 148 | 55.2 | 66 | 24.6 |
| Ophthalmology | 148 | 21,180 | 38 | 25.9 | 44 | 29.7 |
| Orthopedic Surgery | 168 | 18,659 | 10 | 6.0 | 53 | 31.5 |
| Otolaryngology | 80 | 39,184 | 10 | 12.5 | 22 | 27.5 |
| Pain Medicine and Pain Management | 34 | 92,197 | * | * | * | * |
| Pediatrics** | 334 | 2,748 | 192 | 57.5 | 82 | 24.6 |
| Physical Medicine and Rehabilitation | 44 | 71,243 | 15 | 34.1 | 10 | 22.7 |
| Plastic Surgery | 31 | 101,119 | * | * | 18 | 58.1 |
| Preventive Medicine | 52 | 60,283 | 19 | 36.5 | 23 | 44.2 |
| Psychiatry | 217 | 14,446 | 66 | 30.6 | 89 | 41.0 |
| Pulmonary Disease | 35 | 89,563 | * | * | 25 | 71.4 |
| Radiation Oncology | 43 | 72,900 | 12 | 28.6 | 13 | 30.2 |
| Radiology and Diagnostic Radiology | 196 | 15,993 | 29 | 14.8 | 70 | 35.7 |
| Rheumatology | 39 | 80,377 | 14 | 35.9 | 11 | 28.2 |
| Thoracic Surgery | 36 | 87,075 | * | * | 14 | 38.9 |
| Urology | 63 | 49,757 | * | * | 18 | 28.6 |
| Vascular and Interventional Radiology | 21 | 149,271 | * | * | * | * |
| Vascular Surgery | 29 | 108,093 | * | * | 11 | 37.9 |
| . accama war gor y | | 100,000 | | | | 0 |

Source: Association of American Medical Colleges, 2017 State Physician Workforce Data Book

^{*} Counts for specialties with fewer than 10 physicians are not shown
** Only those 21 years or younger are included in People per Physician
*** Only those 65 years or older are included in People per Physician

IOWA BOARD OF MEDICINE | PROTECTING THE HEALTH AND SAFETY OF IOWANS

The Board of Medicine is fortunate to have dedicated, competent personnel who take their jobs, and the Board's mission, seriously. Every day, these men and women perform licensure and regulatory enforcement duties that enable the Board to protect the health of lowans.

IOWA BOARD OF MEDICINE

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