



Governor  
Douglas A. Ducey

**ARIZONA BOARD OF OSTEOPATHIC EXAMINERS  
IN MEDICINE AND SURGERY**

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**Board Members:**  
Gary A. Erbstoesser, D.O., Pres.  
Jonathan A. Maitem, D.O., V.P.  
Jeffrey H. Burg, AIF  
Dawn K. Walker, D.O.  
Ken S. Ota, D.O.  
Samara Shipon, D.O.  
Michael Goodman

**Executive Director**  
Justin Bohall

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**DRAFT MINUTES FOR VIRTUAL MEETING OF THE**

**ARIZONA BOARD OF OSTEOPATHIC EXAMINERS IN MEDICINE AND SURGERY**

**Held on Saturday, October 23, 2021**

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**1. CALL TO ORDER**

Board President Erbstoesser called the meeting to order at 8:30 a.m.

President Erbstoesser thanked the Board members and staff for facilitating today’s proceedings, and read aloud the Board’s Mission Statement: “The mission of the Board is to protect the public by setting educational and training standards for licensure, and by reviewing complaints made against osteopathic physicians, interns, and residents to ensure that their conduct meets the standards of the profession, as defined in law (A.R.S. § 32-1854).”

**2. ROLL CALL AND REVIEW OF AGENDA**

	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Present</b>	X	X	X	X	X		X
<b>Absent</b>						X	

**3. CALL TO THE PUBLIC**

- A. President Erbstoesser welcomed the Medical Students from Midwestern University Arizona College of Osteopathic Medicine, A.T. Still University Kirksville College of Osteopathic Medicine, and A.T. Still University School of Osteopathic Medicine in Arizona.
- B. No individuals addressed the Board during the Call to the Public portion of the meeting.

**4. REVIEW, CONSIDERATION, AND APPROVAL OF MINUTES**

- A. September 11, 2021 Open Session

**MOTION: Mr. Burg moved for the Board to approve the September 11, 2021, Open Session Minutes.**

**SECOND: Vice President Maitem**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

B. September 11, 2021 Executive Session

**MOTION: Vice-President Maitem moved for the Board to approve the September 11, 2021, Open Session Minutes.**

**SECOND: Mr. Burg**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

**7. REVIEW, DISCUSSION, AND ACTION ON INVESTIGATIVE HEARINGS PURSUANT TO A.R.S. § 32-1855 (E).**

A. DO-19-0124A, Gary Jay Newman, DO

Dr. Newman participated in the virtual meeting during the Board's consideration of this matter. Dr. Newman was represented by legal counsel Peter Kline.

Dr. Newman provided a summary of his education, training, current position, and practice setting. Mr. Kline stated that he would wait to make any comments.

Board staff provided a summary of the case. The case came to the Board as a settlement regarding a malpractice case filed against Dr. Newman for failure to recognize postpartum hemorrhage after a c-section which resulted in the death of a 31 year old female. The patient had had previous c-sections and was expected to have another. According to Dr. Newman the nurses allowed the patient to push but was not able to progress. A c-section was performed with some difficulty getting out the baby's head which a nurse assisted with. There was no noticeable bleeding and the patient was taken to recovery and was stable. Dr. Newman was notified that the patient had become tachycardic and had low blood pressure. Dr. Newman provided further medical advice to help stabilize the patient. Dr. Newman was notified that the patient was being taken to the operating room but they found there were no operating rooms available. Patient was taken back to the labor and delivery operating room where they found 3,000 cc's of blood but no source of active bleeding was discovered. During that period of time the patient had a cardiac arrest, the code team was called and attempted to revive the patient for 3 hours but they were not successful in reviving the patient.

Dr. Newman stated he performed the c-section and there was difficulty with getting the baby's head out which is not unusual. Patient was stable and went to the recovery room with a 1-1 nurse and Dr. Newman stayed in the on-call room until 7pm when his shift ended. Dr. Newman stated he was called, gave orders, was called again and drove rapidly back to the hospital. Dr. Newman stated there was a mix up with which operating room to take the patient to. Dr. Newman confirmed that they could not find the source of the bleeding. Dr. Newman stated that the patient had cardiac arrest during the procedure and they did "heroic efforts" to try and save this patient but they were not successful.

Dr. Walker asked Dr. Newman if this case changed the procedures and protocols when it comes to operating rooms. Dr. Newman stated that it did and they no longer go to main operating rooms and stay in labor and delivery. Dr. Newman also stated that 15 - 20 minutes would have been saved if they did not have to move to a different operating room. Dr. Newman stated that the autopsy did show bleeding but that he would have not been able to see this bleeding. The Board agreed there did not appear to be any issue with standard of care for this patient.

Upon hearing the summary of the case and reviewing all materials provided the Board made a motion to dismiss the case.

**MOTION: Vice-President Maitem moved for dismissal.**

**SECOND: Dr. Walker**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

B. DO-20-0133A, Steven Horrocks, DO

Dr. Horrocks participated in the virtual meeting during the Board’s consideration of this matter. Dr. Horrocks provided a summary of his history and training as well as his current work environment to the Board.

Board staff provided a summary of the case. The Complainant alleges Dr. Horrocks used psychiatric drugs “applied to me in such a way that caused great mental and physical harm”. Patient states that changes to medications were mostly made via telephone. Patient had been taking Prozac for 29 years and was wanting to try and get off the medication. She spoke to Dr. Horrocks about this and was instructed to stop the medication and there was no mention of weaning off the medication in the medical records. Patient stated she felt “fine” after being off the medication for 3 weeks but was complaining of muscle aches. Patient went to see Dr. Horrocks after having increased symptoms and was prescribed a smaller dose of the medication. Patient attempted to contact Dr. Horrocks’s office due to continuing to have side effects but there was no record of the phone call being returned.

Dr. Horrocks stated that the phone calls were returned but that they were not transferred to The Board by mistake. Dr. Horrocks stated he had called the patient back and addressed her concerns. Dr. Horrocks stated they had talked about a plan to wean the Prozac and to call him and discuss that when she was ready. Dr. Horrocks stated the patient never called him and when he saw her next she had already stopped the medication. Patient had stated to Dr. Horrocks that she did not want to start another medication like Prozac.

Dr. Erbstoesser questioned Dr. Horrocks if he had ever mentioned psychiatry to the patient but Dr. Horrocks stated she was not interested in seeing a psychiatrist. Dr. Erbstoesser asked what changes have been made to make sure documentation mistakes don’t happen. Dr. Horrocks stated that he is much more careful when documenting. Dr. Horrocks also stated he has learned to be much more open with his patients about suicidal ideations.

Upon hearing the summary of the case and reviewing all materials provided the Board made a motion to issue a non disciplinary letter of concern secondary to failure to adequately document records

**MOTION: Vice-President Maitem moved for the Board to issue a non disciplinary letter of concern secondary to failure to adequately document records.**

**SECOND: President Erbstoesser**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

C. DO-21-0002A, Kelly Goad, DO

The above referenced case was granted a continuance and will be reviewed at a later date.

D. DO-21-0050A, Jared Dayton, DO

Dr. Dayton participated in the virtual meeting during the Board’s consideration of this matter. Dr. Dayton was represented by legal counsel Doug Cullins. The complainant’s wife , MG, was present.

Dr. Dayton provided a summary of his history and training as well as his current work environment to the Board.

Board staff provided a summary of the case. The complainant is the father of patient DG. The patient was seen regularly by Dr. Dayton until November 2015 and was seen again in February 2018. In April 2018, a USD obtained at the emergency department showed the patient was positive for THC, benzodiazepines and amphetamines. The patient's weight during visits was in the 140 pound range. Patient was seen by Dr. Dayton in 2020 for congestion and a cough. Labs were normal. Patient

continued to see Dr. Dayton and be seen at the emergency room several times due to not feeling well. Patient was diagnosed with a viral syndrome. Patient continued to lose weight even though he was eating a lot. Patient was seen by Dr. Dayton in September with his father and his father stated that the patient was not eating and his weight was 101 pounds. Dr. Dayton stated that the patient should be seen at MD Anderson. MD Anderson stated that the patient should be seen at Banner Gateway. Banner Gateway diagnosed the patient with HIV/AIDS September 28, 2020. Patient passed away on October 5, 2020.

Dr. Dayton stated that he was very familiar with this patient and his father. Dr. Dayton said that patients' questions and concerns were vague and not always specific. Tests were ordered based on the patient's complaints and everything came back normal and the emergency room had similar findings. Dr. Dayton stated there was a follow up in regards to the positive USD in the emergency room but that the patient did not follow through with their request.

Questions were opened up to the Board. Dr. Ota stated his concern about the patient's continued weight loss and questioned why further testing was not done. Dr. Dayton stated that in this case he can not say for certain why that was not done but he did try to question the patient about his eating and the patient stated he was eating well. Dr. Ota stated that an HIV test would be at the top of a diagnostic list when a young person has significant weight loss. Dr. Erbstoesser agreed with Dr. Ota. Dr. Dayton reiterated that when he spoke with the patient the patient would tell him that he was eating well and was more concerned with the health of his father. The Patient's mother, MG, stated that DG told her that he would throw up and doesn't understand why he would tell Dr. Dayton that he was eating.

**MOTION: President Erbstoesser moved for the Board to enter into Executive Session to obtain legal advice pursuant to A.R.S. § 38-431.03(A)(3).**

**SECOND: Dr. Ota**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

The Board entered into Executive Session 9:55 am.  
The Board returned to Open Session at 10:05 am.

No legal action was taken by the Board during Executive Session.

Mr. Cullins stated that Dr. Dayton had taken the matter very seriously and had a good relationship with the patient and his father. Dr. Dayton ran tests, referred the patient to specialists and did his best with the information he was provided. Dr. Dayton has been cooperative and open with the Board and asked that the case be dismissed.

Upon hearing the case and reviewing all materials provided the Board made the following motions:

**MOTION: Vice-President Maitem moved for the Board to issue a decree of censure in violation of A.R.S. § 32-1854(6), (39).**

**SECOND: Mr. Goodman**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

E. DO-20-0146A, Olivia Morris, DO

Dr. Morris participated in the virtual meeting during the Board’s consideration of this matter. Dr. Morris was represented by legal counsel Michele Thompson.

Dr. Morris provided a summary of her history and training as well as her current work environment to the Board.

Board staff provided a summary of the case. Patient, JH, sustained a displaced and fractured left humerus in June 2020 . Patient was seen at the emergency room where the emergency room physician called the on-call surgeon, Dr. Olivia Morris, and advised to put the patient's arm in a sling and have her follow up that Monday. That same day the patient began having severe pain and went to the emergency room at Banner hospital in Tucson where she was admitted and a procedure was performed. Dr. Morris stated that she does not recall this patient or a phone call from the emergency room doctor. Dr. Morris also advised that it is not uncommon at that hospital for emergency room physicians to send patients

home in splints with non displaced fractures without contacting the surgeon. Dr. Morris stated she would always come to the ED when notified. Dr. Morris also advised that she had COVID during this time frame.

Michele Thompson stated they reviewed the records and the records suggest that the patient's fracture was reduced. Ms. Thompson reiterated that Dr. Morris does not recall this patient or being notified. Dr. Morris would not have suggested that a patient be splinted and sent home.

Dr. Morris stated that she would never discharge a patient with a dislocation like the patient had. Dr. Morris said that she would have come in but that she was at home during this time with COVID. She does not remember this patient, there are no records of her calling and she does not have much information to defend herself but this is a case that she would have not let this patient leave with such a dislocation/fracture. Dr. Morris also stated that she keeps a list of patients that she would need to see in the emergency room and give a verbal order to her staff.

Upon hearing the case and reviewing all materials provided the Board made the following motion:

**MOTION: Vice-President Maitem moved for dismissal.**

**SECOND: Dr. Walker**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

F. DO-20-0010A, Robert Frayser, DO

Dr. Frayser participated in the virtual meeting during the Board's consideration of this matter. Dr. Frayser provided a summary of his history and training as well as his current work environment to the Board.



Board staff provided a summary of the case and came to the Board as a malpractice complaint. The patient was a 64 year old male who was seen by Dr. Frayser on June 10, 2014 with a complaint of severe lower back pain, lower extremity numbness and inability to walk. Dr. Frayser noted that the patient had “remarkably cold knees to toes”. Dr. Frayser diagnosed the patient with lumbar disc herniation and the patient was instructed to return in 1 week. Nursing staff called the patient 2 days later and the patient stated he was not doing well and both his legs went numb. The patient was scheduled for an MRI the next week but ended up going to the emergency room although this could not be verified. The malpractice complaint alleges that the patient developed paraplegia and loss of bowel and bladder function.

Dr. Frayser stated that the patient was seen at his clinic as an ER follow up for knee pain. Patient was complaining of low back pain and tingling in his legs. Patient had a history of degenerative disc disease and due to this an MRI was ordered. Dr. Frayser did not understand why the MRI was not done but an ultrasound was performed that afternoon during the initial appointment. Dr. Frayser stated that he told the patient, like he tells all of his patients, if he got worse than to come back. The patient did not come back and during a chart review Dr. Frayser saw that a couple of nurses called the patient. Dr. Frayser stated he was also not aware of this until he received a notice from the Arizona Board.

**MOTION: Vice-President Maitem moved for the Board to enter into Executive Session to obtain legal advice pursuant to A.R.S. § 38-431.03(A)(3).**

**SECOND: Dr. Ota**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

Upon hearing the case and reviewing all materials provided the Board made the following motion:

**MOTION: Vice-President Maitem moved for an Administrative Warning referring to A.R.S. § 32-1854(6), (39). CME of 20 hours in neurologic and vascular emergencies with 6 months to complete.**

**SECOND: Mr. Goodman**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

**G. DO-21-0063A, Brian Friedman, DO**

Dr. Friedman participated in the virtual meeting during the Board’s consideration of this matter. Dr. Friedman was represented by legal counsel Vinnie Lichvar. The complainant, ER, was also present during the virtual meeting.

Dr. Friedman provided a summary of his history and training as well as his current work environment to the Board.

Board staff provided a summary of the case. Patient ER had a balloon sinus dilation by Dr. Friedman on October 24, 2017. Patient stated the procedure was extremely painful and had filled her prescription of 4 tablets of percocet and took one half tablet before the procedure as instructed. She states she was given another full tablet after the procedure but Dr. Friedman stated he would not be giving her the other 2 tablets back due to their addictive nature. Dr. Friedman’s medical assistant stated this was common practice for Dr. Friedman. When the patient confronted Dr. Friedman about this he did return her medication. The patient's husband confirmed what patient ER told the Board staff.

Dr. Friedman apologized to patient ER and wanted the Board to know that it was not his intention to cause the patient discomfort. Dr. Friedman stated there was no notes or documentation that the patient was distressed. Dr. Friedman stated he did not withhold medication from the patient but if he did it would have been documented in the medical records. Dr. Friedman also added that if medication was withheld it would have been due to concern,

misuse, overuse and drug to drug interaction. Dr. Friedman instructed his staff members to cooperate fully with Board staff and their investigations.

Patient ER stated she did not feel distressed but the more that time passed and the more medical professionals she spoke to she felt she needed to say something and not just look the other way about something that concerned her. The patient stated she does take low doses of certain medications and there's not a history that she needs to be protected from an opioid to the extent that a medical practitioner would say that he would keep the medication. She also stated she has deep respect for medical practitioners but has no reason to report a falsehood. Patient ER stated her concern was that Dr. Friedman really wanted her medication and she told Dr. Friedman that she wanted to take the rest of the medication home due to her being in excruciating pain but that if Dr. Friedman wanted to keep them, that patient ER would need to witness Dr. Friedman flush them down the toilet. Patient ER did end up getting to take the rest of her medication home with her.

Dr. Maitem requested that the Board conduct a chart review and be provided with 20 charts to review and see if this is standard practice for Dr. Friedman to help the Board make a decision about this case.

Upon hearing the case and reviewing all materials provided the Board made the following motion:

**MOTION: Vice-President Maitem moved to conduct a chart review of 20 charts for diversion in the last 2 years.**

**SECOND: Dr. Walker**

**VOTE: 5-aye, 0-nay, 0-abstain, 0-recuse, 2-absent**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
Aye:	6	X	X	X	X	X		X
Nay:	0							
Abstain/ Recuse:	0							
Absent:	1						X	

**7. CONSIDERATION AND ACTION ON PROPOSED CONSENT AGREEMENTS, COMPLIANCE WITH TERMS OF BOARD ORDERS, AND REQUESTS TO MODIFY OR TERMINATE ORDERS**

B. DO-16-0200A, Sean K. Sackett, DO

Dr. Sackett participated in the virtual meeting during the Board’s consideration of this matter.

Board staff provided a summary of the case. In 2012 Dr. Sackett was reported to the Board for inappropriate prescribing and received a decree of censure along with other conditions to follow and complete. Dr. Sackett completed all required conditions. Dr. Sackett is requesting to be released from his probation 6 months early due to following & completing all requirements by the Board.

Dr. Sackett stated he had learned his lesson and would no longer participate in pain management with his patients.

Upon hearing the case and reviewing all materials provided the Board made the following motion:

**MOTION: Vice-President Maitem moved to terminate probation.**

**SECOND: Dr. Ota**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

**8. REVIEW, CONSIDERATION, AND ACTION ON APPLICATIONS FOR LICENSURE PURSUANT TO A.R.S. § 32-1822; PERMITS PURSUANT TO A.R.S. § 32-1829; AND RENEWALS OF LICENSES PURSUANT TO A.R.S. § 32-1825 (C-D) AND A.A.C. R4-22- 207.**

A. DO-21-0108A, Ali Abtahi, DO

Dr. Abtahi participated in the virtual meeting during the Board’s consideration of this matter. Dr. Abtahi was represented by legal counsel Bob Milligan.

Board staff provided a summary of the application. Dr. Abtahi failed to disclose a “yes” answer on his application. Dr. Abtahi filed a supplemental response and explains why he failed to disclose his “yes” answer on his application. Dr. Abtahi stated he was with individuals that were arrested but he was not.

Dr. Abtahi apologized for the confusion and briefly explained the circumstances when everything occurred. Dr. Abtahi said it was a clerical error on his part and an oversight on the application. Dr. Abtahi stated that he has nothing to hide and never stepped foot in a courtroom. Dr. Abtahi did not realize this was even on his record.

**MOTION: Vice-President Maitem motioned to grant unrestricted licensure.**

**SECOND: Dr. Ota**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

B. DO-21-0123A, John Layke, DO

Dr. Layke participated in the virtual meeting during the Board’s consideration of this matter.

Board staff provided a summary of the application. Dr. Layke had 2 “yes” answers on his application due to 2 malpractice cases with one being settled and the other case has yet to be settled.

Dr. Layke gave a summary of the cases. Dr. Layke stated for the case that is unsettled he offered to correct what the patient did not like but she decided to go with another doctor. Dr. Layke is requesting licensure in Arizona in order to expand his current practice.

Upon hearing the case and reviewing all materials provided the Board made the following motion:

**MOTION: Vice-President Maitem made a motion to grant an unrestricted license.**

**SECOND: Dr. Ota**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent**

**MOTION PASSED.**

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

**9. QUESTION AND ANSWER SESSION BETWEEN THE MEDICAL STUDENTS AND MEMBERS OF THE BOARD AND DISCUSSION RELATING TO ISSUES SURROUNDING THE PRACTICE OF OSTEOPATHIC MEDICINE.**

The Board met with the medical students participating in the virtual meeting and discussed current issues surrounding the practice of osteopathic medicine.

**10. REVIEW, DISCUSSION, AND ACTION ON THE FOLLOWING MISC ITEMS.**

- A. SB1001: Breast Implant Surgery; Informed Consent - Working Group

	Vote	Gary Erbstoesser, DO	Jonathan Maitem, DO	Jeffrey Burg	Ken Ota, DO	Dawn Walker, DO	Samara Shipon, DO	Michael Goodman
Aye:	6	X	X	X	X	X		X
Nay:	0							
Abstain/ Recuse:	0							
Absent:	1						X	

**11. REVIEW, CONSIDERATION, AND ACTION ON REPORTS FROM EXECUTIVE DIRECTOR.**

**A. Report from Board Members**

**B. Executive Director Report**

1. Financial Report
2. Current Events that Affect the Board

The Board’s next meeting is scheduled for December 4, 2021.

3. Licensing and Investigations Update

Director Bohall provided the Board with an update on the licensing and investigations processes.

4. Report on Director Dismissed Complaints

Director Bohall reported that 11 cases were dismissed since the Board’s last meeting.

**12. ADJOURNMENT**

**MOTION: Vice-President Maitem moved for the Board to adjourn.**

**SECOND: Mr. Goodman**

**VOTE: 6-aye, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

	<b>Vote</b>	<b>Gary Erbstoesser, DO</b>	<b>Jonathan Maitem, DO</b>	<b>Jeffrey Burg</b>	<b>Ken Ota, DO</b>	<b>Dawn Walker, DO</b>	<b>Samara Shipon, DO</b>	<b>Michael Goodman</b>
<b>Aye:</b>	<b>6</b>	X	X	X	X	X		X
<b>Nay:</b>	<b>0</b>							
<b>Abstain/ Recuse:</b>	<b>0</b>							
<b>Absent:</b>	<b>1</b>						X	

The Board's meeting adjourned at 1:16 p.m.

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**Justin Bohall, Executive Director**