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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

F I N A L M I N U T E S

MEETING OF:

STATE BOARD OF OSTEOPATHIC MEDICINE

TIME: 10:30 A.M.

Held at

PENNSYLVANIA DEPARTMENT OF STATE

2525 North 7th Street

CoPA HUB, Eaton Conference Room

Harrisburg, Pennsylvania 17110

as well as

VIA MICROSOFT TEAMS

Wednesday, June 5, 2024

State Board of Osteopathic Medicine
June 5, 2024

BOARD MEMBERS:

Arion R. Claggett, Acting Commissioner, Bureau of
Professional and Occupational Affairs
Sirisha Reddy, Special Assistant, on behalf of Debra
L. Bogen, M.D., FAAP, FABM, Acting Secretary of
Health
John B. Bulger, D.O., MBA, Chairman
Hillary D. Snyder, MSPAS, PA-C, Vice Chairperson
Randy Litman, D.O., Secretary - Absent
Thomas S. Dardarian, D.O.
Joseph M. Zawisza, D.O.
Jonathan P. Oline, D.O.
Ayanna S. Kersey-McMullen, D.O. - Absent
James R. Latronica, D.O. - Absent

BUREAU PERSONNEL:

Dana M. Wucinski, Esquire, Board Counsel
Ashley Goshert, Esquire, Board Counsel
Keith E. Bashore, Esquire, Board Prosecution Liaison
Berk V. Demiral, Esquire, Board Prosecutor
Adrienne Rachelle McClendon, Esquire, Board
Prosecutor
Courtney J. Restemayer, Esquire, Board Prosecutor
Priscilla Turek, Board Administrator
Holly Hoffman, Law Clerk, Department of State

ALSO PRESENT:

Andy Sandusky, Executive Vice President, Public
Policy and Association Affairs, Pennsylvania
Osteopathic Medical Association
Mary Marshall, Director, Workforce & Professional
Development, The Hospital and Healthsystem
Association of Pennsylvania
Misha Patel, M.D., Curriculum Education Assistant,
Geisinger Commonwealth School of Medicine
Susan DeSantis, PA-C, Pennsylvania Society of
Physician Assistants
Autumn Karper, Sargent's Court Reporting Service,
Inc.

1 ***

2 State Board of Osteopathic Medicine

3 June 5, 2024

4 ***

5 [Pursuant to Section 708(a)(5) of the Sunshine Act,
6 at 9:30 a.m. the Board entered into Executive Session
7 with Dana M. Wucinski, Esquire, Board Counsel, for
8 the purpose of conducting quasi-judicial
9 deliberations on a number of matters that are
10 currently pending before the Board and to receive the
11 advice of counsel. The Board returned to open
12 session at 10:30 a.m.]

13 ***

14 The regularly scheduled meeting of the State
15 Board of Osteopathic Medicine was held on Wednesday,
16 June 5, 2024. John B. Bulger, D.O., MBA, Chairman,
17 called the meeting to order at 10:30 a.m.]

18 ***

19 Introduction of Board Members/Attendees
20 [Priscilla Turek, Board Administrator, provided an
21 introduction of Board members, staff, and attendees.]

22 ***

23 [The Board experienced technical difficulties from
24 10:31 a.m. until 10:35 a.m.]

25 ***

1 [Chair Bulger reminded everyone that the meeting was
2 being recorded, and those who continued to
3 participate were giving their consent to be
4 recorded.]

5

6 Approval of minutes of the April 10, 2024 meeting

7 CHAIRMAN BULGER:

8 Approval of the minutes. You had sent
9 ahead of time the minutes of the April
10 10, 2024 meeting. Are there any
11 deletions, corrections, or additions to
12 the minutes? Hearing none.

13 Could I have a motion to approve
14 the minutes?

15 DR. ZAWISZA:

16 So moved.

17 CHAIRMAN BULGER:

18 Do I hear a second?

19 DR. OLIVE:

20 Second.

21 CHAIRMAN BULGER:

22 Any further discussion? Please call
23 the roll.

24

25 Arion Claggett, aye; Dr. Bulger, aye;

1 Hillary Snyder, aye; Dr. Dardarian,
2 aye; Dr. Zawisza, aye; Dr. Oline, aye;
3 Sirisha Reddy, aye.

4 [The motion carried unanimously.]

5 ***

6 Report of Prosecuting Attorneys

7 [Keith E. Bashore, Esquire, Board Prosecution
8 Liaison, introduced new prosecuting attorneys: Berk
9 Demiral, Courtney Restemayer, Adrienne McClendon, and
10 Patrick Greene.

11 Chair Bulger welcomed new prosecutors to the
12 State Board of Osteopathic Medicine.

13 Mr. Bashore presented the Consent Agreements for
14 Case No. 21-53-015406, VRP Case No. 24-53-006320, and
15 Case No. 23-53-016779.]

16 ***

17 [Dana M. Wucinski, Esquire, Board Counsel, noted the
18 Board entered into Executive Session this morning for
19 the purpose of conducting quasi-judicial
20 deliberations on a number of matters before currently
21 pending before the Board and to receive the advice of
22 counsel.]

23 ***

24 MS. WUCINSKI:

25 At agenda item 3, I believe the Board

1 would entertain a motion to adopt the
2 Consent Agreement and Order at Case No.
3 21-53-015406.

4 CHAIRMAN BULGER:

5 Is there a motion?

6 DR. DARDARIAN:

7 So moved.

8 DR. ZAWISZA:

9 Second.

10 CHAIRMAN BULGER:

11 Any discussion? Hearing none. Please
12 call the roll.

13

14 Arion Claggett, aye; Dr. John Bulger,
15 aye; Hillary Snyder, aye; Dr. Thomas
16 Dardarian, aye; Dr. Joseph Zawisza,
17 aye; Dr. Jonathan Oline, aye; Sirisha
18 Reddy, aye.

19 [The motion carried unanimously. The Respondent's
20 name is Samir A. Wahib, D.O.]

21 ***

22 MS. WUCINSKI:

23 At agenda item 4, I believe the Board
24 would entertain a motion to adopt the
25 VRP Consent Agreement and Order at Case

1 No. 24-53-006320.

2 CHAIRMAN BULGER:

3 Do we have a motion?

4 DR. DARDARIAN:

5 So moved.

6 DR. ZAWISZA:

7 Second.

8 CHAIRMAN BULGER:

9 Any discussion? Hearing none. Please
10 call the roll.

11

12 Arion Claggett, aye; Dr. John Bulger,
13 aye; Hillary Snyder, aye; Dr. Thomas
14 Dardarian, aye; Dr. Joseph Zawisza,
15 aye; Dr. Jonathan Oline, aye; Sirisha
16 Reddy, aye.

17 [The motion carried unanimously.]

18

19 MS. WUCINSKI:

20 At agenda item 5, I believe the Board
21 would entertain a motion to adopt the
22 Consent Agreement and Order at Case No.
23 23-53-016779.

24 CHAIRMAN BULGER:

25 Do we have a motion?

1 DR. DARDARIAN:

2 So moved.

3 DR. ZAWISZA:

4 Second.

5 CHAIRMAN BULGER:

6 Any further discussion? Hearing none.

7 Please call the roll.

8

9 Arion Claggett, aye; Dr. John Bulger,
10 aye; Hillary Snyder, aye; Dr. Thomas
11 Dardarian, aye; Dr. Joseph Zawisza,
12 aye; Dr. Jonathan Oline, aye; Sirisha
13 Reddy, aye.

14 [The motion carried unanimously. The Respondent's
15 name is Joseph Matthew Palumbo, D.O.]

16

17 Report of Board Counsel - Proposed Adjudication and
18 Order of the Hearing Examiner

19 MS. WUCINSKI:

20 At agenda item 6, I believe the Board
21 would entertain a motion to adopt the
22 Proposed Adjudication and Order of the
23 hearing examiner for Michael S. Cash,
24 D.O., at Case No. 23-53-016601.

25 CHAIRMAN BULGER:

1 Do we have a motion?

2 DR. DARDARIAN:

3 So moved.

4 DR. ZAWISZA:

5 Second.

6 CHAIRMAN BULGER:

7 Any further discussion? Hearing none.

8 Please call the roll.

9

10 Arion Claggett, aye; Dr. John Bulger,
11 aye; Hillary Snyder, aye; Dr. Thomas
12 Dardarian, aye; Dr. Joseph Zawisza,
13 aye; Dr. Jonathan Oline, aye; Sirisha
14 Reddy, aye.

15 [The motion carried unanimously.]

16 ***

17 Report of Board Counsel - Regulatory Status Report -
18 Status of Regulations

19 [Dana M. Wucinski, Esquire, Board Counsel, referred
20 to the Status of Regulations Report that regulatory
21 counsel provided prior to the meeting for the Board's
22 review.]

23 ***

24 Report of Board Counsel - FYI - House Bill 2294

25 [Dana M. Wucinski, Esquire, Board Counsel, addressed

1 House Bill 2294. She noted that physician assistants
2 are licensed by both the State Board of Medicine and
3 the State Board of Osteopathic Medicine, and the
4 physician assistant (PA) supervising physician must
5 be licensed by the state Board as directed in the
6 current regulations.

7 Ms. Wucinski noted physician assistants work for
8 both the boards in hospitals forcing them to obtain a
9 license by both boards if a PA wants to have a
10 supervising physician of those types. She reported
11 it to be a licensure burden, because the PA switches
12 between supervising physicians quite frequently.

13 Ms. Wucinski explained that the legislation would
14 change the definition of supervising physician to
15 include a Medical Doctor (MD) or Doctor of
16 Osteopathic Medicine (DO). She reported a similar
17 bill is being proposed for the Medical Practice Act
18 as well.

19 Ms. Snyder mentioned being confused between the
20 draft legislation and the memorandum noting the
21 difference between dual-license issuing as far as
22 just getting a new number versus actually changing
23 the acts to say the physician assistant can be
24 licensed under either board.

25 Ms. Snyder stated that being licensed under the

1 State Board of Osteopathic Medicine but having a
2 written agreement under the State Board of Medicine
3 becomes confusing because there are two different
4 practice acts and logistical issues as far as the
5 regulations, especially now when regulations are
6 drafted for the State Board of Medicine but not yet
7 for the State Board of Osteopathic Medicine.

8 Ms. Snyder also noted there are separate fees for
9 each board and renewals seem to be an
10 oversimplification of a very cumbersome process. She
11 agreed with decreasing the burden on physician
12 assistants, but believed this falls short of doing
13 that and may further complicate the licensing
14 process.

15 Ms. Wucinski stated it is helpful to hear some of
16 the potential issues, because the Bureau's staff is
17 drafting a bill analysis and will include those
18 comments.

19 Ms. Wucinski addressed a comment by Susan
20 DeSantis from the Pennsylvania Society of Physician
21 Assistants asking whether the Board is open to
22 reciprocity between the boards within a Pennsylvania
23 license since both boards have the same licensing
24 requirements. She mentioned the bill was created
25 because of the six- to eight-week processing time for

1 a PA to obtain a license and the urgent need to add a
2 PA to the opposite board because the primary
3 supervisor has a capacity under the 1:6 ratio.

4 Ms. Wucinski explained that the details would
5 have to be worked out if this were to pass. She
6 mentioned that it also has to do with PAs in the
7 hospitals and with their primary supervising
8 physician being whoever the attending physician is
9 and PAs having to basically jump from an MD to a DO.

10 Ms. Snyder explained that the PA can work
11 underneath the alternate supervising physician, If
12 the PA has a primary agreement under an MD but the
13 group, the practice, or the hospital is a mixed
14 setting, the PA does not need a separate written
15 agreement for each physician and no switching is
16 needed.

17 Ms. Snyder mentioned the new legislation says
18 that the PA only has to name one and can have the
19 list of alternate supervising physicians at the
20 practice level. She stated it is less of an issue of
21 people working in the hospital needing a different
22 attending, which is a separate hospital-based issue
23 as far as who their alternate physicians are.

24 Ms. Snyder noted the supervising physician is
25 their primary agreement within the practice and

1 becomes more of an issue, where the PA has a
2 physician who leaves the practice, who was their
3 supervising physician and under a different board
4 than the new hire, then the PA needs to have a new
5 license under the same board as the physician who has
6 been hired.

7 Ms. Snyder commented that it seems more of a
8 hiring/onboarding issue or a capacity issue. She
9 believed it to be an oversimplification of the actual
10 problem and whether they are talking about issues in
11 hiring, issues in ratios, or turnover problems that
12 the PAs are coming on having a lapse in licensure, or
13 does the Board want to say the PA can have a license
14 with one board and then choose a physician under
15 either board.

16 Dr. Dardarian commented that the other issue is
17 if the PA wants to change jobs. If the PA works in
18 family practice and their supervising physician is an
19 MD, and then the PA takes a job in another family
20 practice group, the PA is leaving private practice.
21 He mentioned that no one is going to wait eight weeks
22 for a PA and will hire somebody else. He noted the
23 Board needs to find a way to make it seamless so PAs
24 are not getting penalized for switching over. He
25 mentioned the PA might have to apply to the other job

1 before they leave their current job and hope they get
2 their license before they start the next job.

3 Ms. Snyder expressed concern that it is trying to
4 avoid a certain board, where they will avoid certain
5 boards and get licensed under the board that allows
6 them to have a written agreement under either board.

7 Ms. Wucinski commented that Act 78 and Act 79 are
8 identical and will be more identical once the
9 osteopathic PA regulation is drafted.

10 Ms. Snyder commented that there are two boards in
11 Pennsylvania and the secondary issue is the six- to
12 eight-week issue, where a PA wants to get a job in
13 Pennsylvania but can get licensed faster in another
14 state. She noted some new grads, who are educated in
15 Pennsylvania and paid through state dollars, leave
16 for another state.

17 Chairman Bulger commented that it is mostly a
18 recruiting issue but sometimes an administrative
19 issue, where an office has an MD and three DOs, and
20 the supervising physicians and MD are licensed under
21 the MD board but the MD leaves and the PA is now in
22 an office of three DOs and has to get a license from
23 the Board to be able to continue what they do every
24 day.

25 Chairman Bulger stated that fixing that makes

1 sense, and the concern is in the bills, where they
2 are going to give reciprocity to both boards and
3 solves everything. He noted it creates other
4 unintended consequences, including discipline to both
5 boards and reviewing the discipline separately, fee
6 schedules, and other things.

7 Chairman Bulger mentioned that the licensing
8 requirements are the same for both boards, but the
9 procedures of both boards are not exactly the same,
10 along with the practice acts. He noted the
11 pragmatics of what happens afterward need to be
12 worked out at the regulatory level before
13 promulgating a regulation that would put into
14 practice the legislative intent. He commented that
15 it is not as simple as saying someone who applies to
16 one board is now licensed by both boards.

17 Ms. Wucinski noted she was not sure that is what
18 it says. She mentioned they use the term
19 "registered," which needs to be updated, but the
20 supervising physician can be licensed under either
21 board.

22 Chairman Bulger commented the process needs to be
23 laid out, because the PA could be with an MD in the
24 morning and a DO in the afternoon taking care of the
25 same patient. He asked whether they would both look

1 at it and have separate opinions if something happens
2 within the purview of the boards. He noted there are
3 practical issues, and the problem needs solved
4 because it does not make any sense to have someone
5 reapply for something that is the exactly the same.

6 Ms. Wucinski noted it is currently written that a
7 physician assistant licensed under both boards with
8 an issue can be disciplined under both boards, even
9 if they are only licensed under the Medical Board and
10 being supervised by a DO, only the Medical Board has
11 the authority to discipline because they do not have
12 a license under the Osteopathic Board. She noted
13 that is a concern to place in the bill analysis.

14 Ms. Snyder commented that the bill does not say
15 they apply under one board and receive a license
16 under both. She explained that the bill says someone
17 applying under one board can have a supervising
18 physician who is licensed under either board, so the
19 written agreement will go to either board but still
20 creates a lot of downstream issues.]

21 ***

22 Report of Board Counsel - FYI House Bill 2200
23 [Dana M. Wucinski, Esquire, Board Counsel, addressed
24 House Bill 2200 regarding criminal history background
25 checks. She mentioned Pennsylvania has joined

1 several interstate licensure compacts, including the
2 Interstate Medical Licensure Compact (IMLC) in the
3 last couple of years, but never became fully
4 operational because of the background check language
5 in the Pennsylvania statute was deemed unacceptable
6 to join the multistate compacts.

7 Ms. Wucinski stated after years of negotiation
8 between the the Federal Bureau of Investigation
9 (FBI), Department of State, and the Pennsylvania
10 State Police, all parties have agreed to changes in
11 the background checks that will finally allow them to
12 join the compacts and allow it to be fully
13 implemented in Pennsylvania.

14 Ms. Wucinski explained that the legislation
15 amends Title 63 of the Pennsylvania Consolidated
16 Statutes to require applicants for a multistate
17 compact license to get an FBI background check with
18 fingerprints. She noted the agreement would also
19 require all new applicants for licenses in health-
20 related fields to undergo an FBI fingerprint
21 background check. She also noted that individuals
22 who are already licensed in Pennsylvania will not
23 need to complete an FBI background check to renew
24 their license.]

25

1 Report of Board Counsel - FYI - Implicit Bias and
2 Cultural Competence

3 [Dana M. Wucinski, Esquire, Board Counsel, addressed
4 House Bill 2178 regarding implicit bias and cultural
5 competence. She noted the legislation will require
6 all health-related boards within the Department of
7 State to complete complicit bias training as part of
8 each profession's continuing education requirements.
9 She mentioned the Board has provided feedback over
10 the last several years and noted it is working its
11 way around again.]

12 ***

13 Report of Board Counsel - Discussion Regarding
14 Schedule II Prescriptions

15 [Dana M. Wucinski, Esquire, Board Counsel, addressed
16 Schedule II prescriptions. She noted it has been
17 requested that the Board review their regulations to
18 determine whether a regulatory change should be made
19 to create an exception for the 30-day supply rule to
20 permit PA spray prescriptions or orders for refills
21 of intrathecal pain pumps currently under § 25.177,
22 entitled prescribing and dispensing drugs,
23 pharmaceutical aids, and devices.

24 Ms. Wucinski stated a PA is limited with their
25 Schedule II prescribing to a 30-day dose, noting pain

1 pumps are good for three- to six-months but
2 technically under the existing regulations, a PA
3 would not be able to prescribe those.

4 Ms. Wucinski asked how the pain pump, which is
5 infusing this medication over a three- to six-month
6 period, fits into the Schedule II requirement,
7 whether they prohibited, and whether the Board is
8 open to a regulation change to make an exception.
9 She noted it was discussed with the Medical Board and
10 believed that they were in favor but would double
11 check.

12 Chairman Bulger did not have any trouble with the
13 exception but asked whether there was some other way
14 to deal with this other than the regulatory process.

15 Ms. Wucinski explained that it would have to be a
16 regulatory change because it is in the regulation and
17 is limited to 30 days.

18 Chairman Bulger commented that it is really not a
19 six-month supply because they are giving one aliquot
20 of the drug because or maybe someone from the
21 Pharmacy Board saying it is not a 30-day supply.

22 Dr. Dardarian commented that he did not see the
23 impetus of the issue and asked whether it is coming
24 from neurosurgeons or pain management because they
25 could just send it to the covering physician.

1 Ms. Wucinski noted Ms. DeSantis said there was a
2 question raised by the neurosurgery and pain
3 management.

4 Ms. Wucinski stated if the Board accepts the
5 physician assistants prescribing this pain pump that
6 the Board can then decide whether or not a regulatory
7 change needs to be made or whether the existing
8 regulations are sufficient. She noted the
9 regulations talk about two different ways that they
10 can prescribe, where a physician assistant may
11 prescribe a Schedule II controlled substance for
12 initial therapy up to a 72-hour dose, which would
13 also affect that because then the physician assistant
14 shall notify the supervising physician of the
15 prescription as soon as possible but longer than 24
16 hours of the issuance.

17 Chairman Bulger commented that none of that was
18 written with a three- to six-month pain pump because
19 they are all written about pills.

20 Ms. Wucinski stated the Board would have to let
21 them know whether they agree with the regulatory
22 change in the physician assistant prescribing it and
23 could it be for the initial prescription. She noted
24 Ms. DeSantis said the Medical Board decided they
25 agree with the regulatory change, but it has to be an

1 explicit notification.

2 Dr. Zawisza commented that he agreed with renewal
3 but not with the start of the medication. He
4 explained that there needs to be certain limitations
5 and a physician needs to be directly involved when
6 talking about a pain pump.

7 Ms. Wucinski explained that regulatory counsel
8 would draft a regulation if the Board moves forward.

9 Chair Bulger commented that he agreed with moving
10 forward because it will come back to the Board again.
11 He asked whether there was a way to ascertain whether
12 this was acceptable and could regulatory counsel
13 review the current regulation and ascertain if it was
14 covered in the current regulation given the fact that
15 the regulation was written before this existed. He
16 noted there has to be explicit notification within 72
17 hours of initial prescription. He also noted that
18 anything that happens needs to be in the
19 collaborative agreement explicitly.]

20

21 [The Board experienced technical difficulties from
22 11:11 a.m. until 11:12 a.m.]

23

24 Report of Board Counsel - Other - BPOA Annual Report
25 [Dana M. Wucinski, Esquire, Board Counsel, referred

1 to BPOA's Annual Report the department is required to
2 send to the Professional Licensure Committee. She
3 noted the report was sent on April 25, 2024, and the
4 Board already had a presentation. She explained that
5 the report includes dispositions of the cases and
6 case categories for their specific Board.]

7

8 Report of Board Counsel - Other

9 MS. WUCINSKI:

10 At agenda item 13, I believe the Board
11 would entertain a motion to grant the
12 Application to Practice as an
13 Osteopathic Graduate Trainee of Andrew
14 Waltersdorf.

15 DR. DARDARIAN:

16 So moved.

17 DR. ZAWISZA:

18 Second.

19 CHAIRMAN BULGER:

20 Any further discussion? Please call
21 the roll.

22

23 Arion Claggett, aye; Dr. John Bulger,
24 aye; Hillary Snyder, aye; Dr. Thomas
25 Dardarian, aye; Dr. Joseph Zawisza,

1 aye; Dr. Jonathan Oline, aye; Sirisha
2 Reddy, aye.

3 [The motion carried unanimously.]

4 ***

5 Report of Board Counsel - Other - New Board Counsel
6 [Dana M. Wucinski, Esquire, Board Counsel, informed
7 Board members that she has been promoted to an acting
8 senior position and introduced new Board Counsel,
9 Ashley Goshert.]

10 Chairman Bulger welcomed Ms. Goshert and
11 congratulated Ms. Wucinski on her promotion.]

12 ***

13 Report of Board Chair - No Report

14 ***

15 Report of Vice Chair - No Report

16 [Hillary D. Snyder, MSPAS, PA-C, Vice Chair, also
17 congratulated Ms. Wucinski and thanked her for all of
18 the help and advice over the years. She also
19 welcomed Ms. Goshert.]

20 ***

21 Report of Acting Commissioner

22 [Arion R. Claggett, Acting Commissioner, Bureau of
23 Professional and Occupational Affairs, informed Board
24 members that e-licensure was enabled in the
25 Pennsylvania Licensing System (PALS) on May 31, 2024,

1 to allow licensees to print their own license.

2 Acting Commissioner Claggett noted that licenses
3 will continue to be printed as they are issued until
4 the new licensing system is implemented. There will
5 be no fee for printing their own license. He
6 reported being on track to go into the new licensure
7 system in the summer of 2025.]

8 ***

9 Report of Department of Health - No Report

10 ***

11 Report of Board Administrator

12 [Priscilla Turek, Board Administrator, addressed her
13 attendance at the Federation of State Medical Boards
14 (FSMB) Annual Meeting in April. She mentioned that
15 it was her first meeting and interesting to hear the
16 different aspects of the medical profession. She
17 discussed workforce issues, where it is estimated
18 that there will possibly be a shortage of physicians
19 by 2030. She reported the top five countries for
20 international medical graduates were India,
21 Caribbean, Pakistan, Philippines, and Mexico.

22 Ms. Turek noted the census of licensed physicians
23 in the United States and District of Columbia was
24 over 1 million. She reported 1 million opioid deaths
25 since 1999 with a 75% increase in overdose deaths in

1 2021. She noted that artificial intelligence was
2 mentioned concerning the medical field, and they are
3 looking at possible regulatory status.]

4 ***

5 For the Board's Information/Discussion - Board
6 Meeting Dates

7 [John B. Bulger, D.O., MBA, Chairman, noted the 2024
8 and 2025 Board meeting dates.]

9 ***

10 [Chairman Bulger acknowledged the 80th anniversary of
11 D-Day.]

12 ***

13 Adjournment

14 CHAIRMAN BULGER:

15 Motion to adjourn.

16 DR. DARDARIAN:

17 So moved.

18 DR. ZAWISZA:

19 Second.

20 ***

21 [There being no further business, the State Board of
22 Osteopathic Medicine Meeting adjourned at 11:19 a.m.]

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CERTIFICATE

I hereby certify that the foregoing summary minutes of the State Board of Osteopathic Medicine meeting, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Osteopathic Medicine meeting.



Autumn Karper,

Minute Clerk

Sargent's Court Reporting
Service, Inc.

STATE BOARD OF OSTEOPATHIC MEDICINE
REFERENCE INDEX

June 5, 2024

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TIME	AGENDA
9:30	Executive Session
10:30	Return to Open Session
10:30	Official Call to Order
10:31	Introduction of Board Members/Attendees
10:36	Approval of Minutes
10:39	Report of Prosecuting Attorneys
10:44	Report of Board Counsel
11:15	Report of Acting Commissioner
11:16	Report of Board Administrator
11:18	For the Board's Information/Discussion
11:19	Adjournment