BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against: Allen Michael Amorn, M.D. Physician's and Surgeon's Certificate No. A 94230 Respondent.	Case No. 800-2019-059152

DECISION

The attached Proposed Decision is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on April 22, 2021.

IT IS SO ORDERED: March 21, 2021.

MEDICAL BOARD OF CALIFORNIA

Ronald H. Lewis M.D., Chair
Panel A

BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

ALLEN MICHAEL AMORN, M.D.,

Physician's and Surgeon's Certificate No. A 94230

Respondent.

Agency Case No. 800-2019-059152

OAH No. 2020090552

PROPOSED DECISION

Administrative Law Judge Juliet E. Cox, State of California, Office of Administrative Hearings, heard this matter on January 7 and 20, 2021, by videoconference.

Deputy Attorney General Hamsa M. Murthy represented complainant William J. Prasifka, Executive Officer of the Medical Board of California.

Attorney Adam G. Slote represented respondent Allen Michael Amorn, M.D., who was present for the hearing.

The matter was submitted for decision on January 20, 2021.

FACTUAL FINDINGS

1. The Medical Board of California (Board) issued Physician's and Surgeon's Certificate No. A 94230 to respondent Allen Michael Amorn, M.D., effective March 1, 2006. At the time of the hearing, this certificate was active, and was scheduled to expire on March 31, 2022.

2. Acting in her official capacity as Interim Executive Director of the Board, Christine J. Lally filed an accusation against respondent on March 11, 2020. Complainant William J. Prasifka later replaced Lally as the Board's Executive Director.

3. The accusation alleges that respondent committed and was convicted of criminal misdemeanors in Ohio, and that these convictions constitute unprofessional conduct. In addition, the accusation alleges that the State Medical Board of Ohio (Ohio Board) has taken disciplinary action against respondent because of his criminal conduct and related circumstances. Complainant seeks an order placing respondent on probation in California because of these Ohio events.

Education and Professional Experience

4. Respondent grew up in eastern Ohio. He graduated from medical school in 2004.

5. Respondent completed an internal medicine residency in 2007, a cardiology fellowship in 2010, and a cardiac electrophysiology fellowship in 2012, all in California. He received the California license described in Finding 1 during his internal medicine residency.

6. Respondent was board-certified in internal medicine between 2007 and 2017. He became board-certified in cardiovascular disease in 2010 and in clinical cardiac electrophysiology in 2011, and continues to hold these certifications despite the disciplinary action described below in Finding 19.

7. After completing the residency and fellowships described in Finding 5, respondent was in private practice in cardiac electrophysiology in California between 2012 and 2014.

8. Respondent's wife (Alicia Bachus, M.D.) also grew up in Ohio, and moved to California with respondent for her own internship and family medicine residency. In 2014, respondent and Dr. Bachus decided to return to Ohio, in part to live closer to extended family.

9. Respondent obtained a medical license from the Ohio Board in 2014, and took a position as a cardiac electrophysiologist with Mercy Health Physicians in Youngstown, Ohio. Between 2017 and 2018, he served as his medical group's section director for electrophysiology, and as medical director for its arrhythmia program. Respondent also served on several other committees within his medical group and at the local hospital.

10. Respondent left his position at Mercy Health Physicians in late December 2018, after the events described below in Findings 13 through 16.

11. Between January 2019 and December 2020, respondent was not employed as a physician. He provided significant day-to-day care in 2020 for his mother-in-law during her terminal illness, however.[1]

12. Respondent obtained an unrestricted medical license in Louisiana effective September 30, 2020. In December 2020, he began serving as a clinical assistant professor of medicine at the Louisiana State University (LSU) Health Sciences Center in Shreveport, Louisiana. His focus in this position also is in cardiac electrophysiology; he treats patients and teaches medical students, residents, and fellows.

Respondent's Arrest, Hospitalization, and Criminal Convictions

13. On December 27, 2018, respondent went to Mercy Health St. Elizabeth Youngstown Hospital to treat patients for whom he had scheduled appointments. He performed one or more cardiac electrophysiology procedures that morning.

14. At mid-day, respondent contacted his wife by text message. He told her that he intended to kill himself, and that she should leave their house and take their children with her because if she interfered with his plan he would kill her and their children as well. Dr. Bachus called local law enforcement officers for help, telling them that respondent had threatened suicide and needed immediate inpatient psychiatric care.

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[1] Respondent also supervised his elder children's videoconference school during the early months of the COVID-19 pandemic.

15. Officers from the Mercy Health Youngstown Police Department found respondent at a desk in the hospital electrophysiology laboratory. He declined initially to identify himself, and then took a knife from his pocket. The officers directed him to drop the knife; he did not; and they subdued him with a taser.

16. The police officers arranged for a nurse to transport respondent to the emergency room. He was admitted for inpatient psychiatric treatment, and stayed for several days. After discharge, respondent received additional mental health treatment, as described in greater detail below in Findings 27 through 30.

17. The People of the State of Ohio charged respondent with two misdemeanors because of his behavior toward police officers on December 27, 2018 (as described in Finding 15). The relevant criminal complaints summarize these crimes as "aggravated menacing" and "resisting arrest." The People later amended the first complaint to charge respondent with "disorderly conduct," a misdemeanor violation of Ohio Revised Code section 2917.11. On March 25, 2019, respondent pled "guilty" to, and was convicted of, this crime; the court dismissed the other charge against respondent. Respondent paid a fine and spent a year on criminal probation.

18. In addition, the People of the State of Ohio charged respondent separately with a domestic violence misdemeanor, because of the threats described above in Finding 14 by respondent against his family. Although detailed records regarding this criminal matter were not in evidence, it resolved when respondent was convicted on a plea of either "guilty" or "no contest." These threats also caused the court to enter a domestic violence restraining order against respondent, which the court lifted a few months later.

Ohio Disciplinary Action

19. As a result of the events described in Findings 13 through 18, the Ohio Board placed respondent's Ohio medical license on probation effective July 10, 2019. The chief condition of the Ohio Board's probation order required respondent to continue receiving mental health care from a psychiatrist and psychotherapist, and to cause these treatment providers to report regularly to the Ohio Board about respondent's mental health. The Ohio Board order stated that it would remain in effect for at least one year.

20. The Ohio Board released respondent from the probation described in Finding 19 effective July 11, 2020.

Mental Health Treatment

21. In hindsight, respondent believes that he suffered from clinically significant depression for many years. He did not confide in friends (other than his wife) or seek help until September 2018, however, when his distress became intolerable to him.

22. In late September or early October 2018, respondent consulted a psychiatrist for treatment and began taking fluoxetine (Prozac), an anti-depressant medication. He also began seeing a psychotherapist. Respondent took the medication as directed and followed his psychotherapist's advice, but felt no improvement even after several weeks.

23. Respondent's psychiatrist advised him to increase his fluoxetine dose, and he did. By mid-December 2018, respondent continued to struggle with sleep disturbance and unhappiness; he also began to think about suicide, which he does not

recall having thought about seriously before this time. Dr. Bachus recalls that respondent did not seem happier or more resilient even with the higher medication dose, but instead seemed more emotionally labile.

24. In addition to respondent's individual treatment, respondent and Dr. Bachus also had been seeing a marriage therapist. On December 22, 2018, they had a joint counseling session that respondent perceived as being very unsuccessful. He left the session alone, bought a utility knife, and spent several hours considering suicide while exchanging text messages with his wife and other adult family members about the possibility that he would kill himself.

25. Respondent eventually returned to his family's home in the evening on December 22, 2018. Dr. Bachus encouraged him over the next several days to seek inpatient psychiatric treatment, but he refused.

26. Respondent did decide, however, to stop taking fluoxetine, because he believed not only that it was not helping him but that it had provoked his frightening suicidal episode on December 22. He did not consult his psychiatrist about this decision. The December 27, 2018, events described above in Findings 13 through 16 occurred a few days after respondent had stopped taking the medication.

27. While he was hospitalized in late December 2018, respondent began taking aripiprazole (Abilify), a different mood-stabilizing medication. He has continued to take that medication ever since, although he now takes a lower daily dose than he did initially.

28. After his discharge from the hospital in early January 2019, respondent undertook about two months of intensive outpatient mental health treatment, involving four days each week of individual and group psychotherapy.

29. Since mid-2019, respondent's primary treating psychiatrist has been Paul Keck, M.D. Respondent sees Dr. Keck approximately quarterly for medication management. Dr. Keck provided a letter in July 2020 confirming that respondent is "100% compliant with his mental health care including our visits and medication," and has been "stable for many months with no signs of relapse or recurrence." In a further letter dated November 30, 2020, Dr. Keck states again that respondent is fully compliant with treatment and is in stable mental health. He supports, "without hesitation, [respondent's] return to professional duties without restriction."

30. Since March 2019, respondent has engaged in individual psychotherapy with Teri Role-Warren, Ph.D. He met with Dr. Role-Warren weekly until mid-2020, and has seen her biweekly since then. At Dr. Role-Warren's recommendation, respondent also participated for six months in a dialectical behavioral therapy (DBT) skills training group with a different psychotherapist. Since moving to Louisiana in December 2020, respondent has continued treatment with Dr. Role-Warren by videoconference.

Expert Opinions

31. Dr. Role-Warren testified that when she first started treating respondent in March 2019, she considered him to have experienced a "major depressive episode," which at that time was in "partial remission." Through cognitive behavioral therapy with her, and through his DBT group, respondent has improved his stress tolerance, his emotional awareness and regulation, and his interpersonal effectiveness. At the time of the hearing, Dr. Role-Warren considered respondent to be in complete remission and to have a good prognosis for avoiding relapse into mental illness.

32. Philip J. Resnick, M.D., provided letters and testimony stating his opinions about respondent's mental health and fitness to practice. Dr. Resnick is a psychiatrist

who has practiced and taught chiefly forensic psychiatry for more than 40 years. He regularly evaluates competence and fitness for duty in many contexts, including for the Ohio Board.

33. Dr. Resnick first met and evaluated respondent in February 2019, in connection with the criminal matter described above in Finding 18. He provided a second evaluation in April 2019 for the Ohio Medical Board. Dr. Resnick concluded then that respondent was "psychiatrically stable and can safely practice medicine," and the Ohio Board relied on this opinion in placing respondent on probation beginning July 10, 2019.

34. Dr. Resnick notes that upon respondent's discharge from inpatient treatment in early January 2019, his treating psychiatrist had diagnosed respondent with "Bipolar Disorder, not otherwise specified and Prozac induced mania." Dr. Resnick disagrees with this diagnosis, however: "I considered the possibility that [respondent] has Bipolar Disorder but he does not give a history of any manic episodes." Instead, Dr. Resnick believes that major depressive disorder, exacerbated in late December 2018 by "abrupt discontinuation of an antidepressant," is a more appropriate diagnosis for respondent.

35. Dr. Resnick's testimony was credible. At the same time, records from respondent's outpatient treatment in fall 2018 (described in Findings 22 and 23), from his hospitalization (described in Findings 16 and 27), and from his intensive outpatient treatment after hospitalization (described in Finding 28), were not in evidence. For this

reason, the evidence was inadequate to evaluate Dr. Resnick's diagnostic disagreement with the psychiatrist(s) who treated respondent during his psychiatric hospitalization.[2]

36. Dr. Resnick's further opinion, as of October 2020 and continuing through the January 2021 hearing in this matter, is that respondent's mental illness is in complete remission and is likely to remain so as long as respondent continues treatment with medication and psychotherapy. This opinion is consistent with all other evidence in this matter, and is persuasive.

References

37. James Kravec, M.D., testified on respondent's behalf. Dr. Kravec and respondent grew up together and attended the same college and medical school. He has worked for Mercy Health Physicians since 2005, and recruited respondent to return to Ohio from California. Dr. Kravec believes that respondent was the best cardiac electrophysiologist at Mercy Health Physicians, and has never had any concerns about respondent's ability to treat patients safely and effectively. Respondent's December 2018 mental health crisis came as a "complete surprise" to Dr. Kravec, and he believes now that respondent has recovered fully.

38. Pratheek Kakkasseril, M.D., also testified to support respondent. Dr. Kakkasseril has been respondent's friend for more than 20 years. He testified credibly that he realized in December 2018, shortly before respondent's hospitalization, that respondent's mental health was deteriorating. When respondent was hospitalized in

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[2]Dr. Keck offered no formal diagnosis, but stated his belief that respondent "experienced a mixed mood episode as a result of antidepressant treatment and withdrawal leading to his hospital admission" in December 2018.

late 2018 and early 2019, Dr. Kakkasseril visited him daily; in the months immediately after respondent's hospitalization, they visited or talked by telephone nearly every day. They have remained close, and Dr. Kakkasseril is confident that respondent's treatment has restored him to his former stability.

39. In addition, Dr. Kakkasseril is a vascular surgeon who collaborated professionally with respondent when respondent worked at Mercy Health Physicians. He praises respondent's medical knowledge and skill, and notes that respondent "took pride in being able to offer advanced treatments in our relatively small community."

40. Lucas W. Henn, M.D., also provided a letter of support. Dr. Henn has known respondent for more than 20 years. They trained together as cardiac electrophysiology fellows (described above in Finding 5) and later worked together in Youngstown. Dr. Henn considers respondent "methodical," "meticulous," and "gifted," and noted that he continues to have a strong professional reputation among cardiovascular health service providers in Youngstown.

41. Dr. Bachus testified about respondent's mental illness and recovery, and provided a letter summarizing her experience and observations. She believes that respondent experienced serious depression for many years before finally seeking treatment in fall 2018. Even so, to her knowledge he had never threatened either violence against others or suicide before late December 2018.

42. During the first several months of 2019, in part because of the domestic violence restraining order described above in Finding 18, respondent did not live with Dr. Bachus and their children. She and the children moved to a new community, seeking a fresh start away from negative publicity that had resulted from respondent's arrest and hospitalization. Respondent rejoined their family in mid-2019.

43. Dr. Bachus confirms that respondent has embraced mental health treatment and relies on his psychiatrist's and psychotherapist's expertise. She describes respondent now as sleeping and eating well, and as demonstrating patience and resilience under stress. She is confident that respondent is "mentally stable with a strong support system in place," and that he is capable of practicing medicine safely and effectively.

Additional Information

44. When respondent was ready to resume medical work, he first sought employment unsuccessfully in Ohio. He received an offer to work at LSU Shreveport in July 2020, and took the position (described in Finding 12) despite the need to relocate because he believed the combination of clinical care and teaching responsibilities would be worthwhile.

45. Respondent's family did not move to Louisiana with him. He travels back and forth between Louisiana and Ohio regularly to spend time with his wife and children, and visits with them daily by videoconference when he is in Louisiana. Respondent and Dr. Bachus do intend to reunite their family again. Although Dr. Bachus also continues to hold a California physician's and surgeon's certificate, they have no plans to move back to California.

LEGAL CONCLUSIONS

1. Discipline against a medical license respondent holds in another state, on grounds that would have been cause for discipline in California, is cause for discipline against respondent's California physician's and surgeon's certificate. (Bus. & Prof.

Code, § 2305.) The out-of-state disciplinary order itself is "conclusive evidence" of the facts the order states. (*Id.*, § 141, subd. (a).)

First Cause for Discipline: Discipline in Another State

2. A physician's actual or potential unfitness to practice because of mental illness affecting competency is cause for the Board to place that physician on probation, or to suspend that physician's license. (Bus. & Prof. Code, § 822.) The matters stated in Findings 13 through 16 caused the Ohio Board to place respondent on probation in Ohio, and likewise constitute cause for the Board to take action affecting respondent's authority to practice medicine in California.

Second Cause for Discipline: Criminal Convictions

3. Conviction of a crime that is "substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct" for which the Board may impose discipline against a California physician. (Bus. & Prof. Code, §§ 2234, 2236.) A crime is "substantially related" to medical practice "if to a substantial degree it evidences present or potential unfitness of a person holding a license to perform the functions authorized by the license in a manner consistent with the public health, safety or welfare." (Cal. Code Regs., tit. 16, § 1360, subd. (a).) In light of the matters stated in Findings 13 through 16, the matters stated in Findings 17 and 18 constitute cause for the Board to take action affecting respondent's authority to practice medicine in California.

Disciplinary Considerations

4. The matters stated in Findings 5 through 7, 9, and 37 through 40 show that until his December 2018 mental health crisis, respondent was a successful and

well-respected physician. The matters stated in Findings 31, 36 through 38, and 43 show in addition that respondent has recovered well from his mental illness. These matters confirm that respondent currently is capable of safe, high-quality medical practice, and that he is likely to remain so if he continues receiving appropriate mental health care.

5. Although the Ohio Board maintained respondent on probation for only one year, California's Manual of Model Disciplinary Orders and Disciplinary Guidelines (12th ed. 2016) (Guidelines, Cal. Code Regs., tit. 16, § 1361) recommend a minimum probation term of five years for a physician who suffers from mental illness that may impair practice. (Guidelines, at p. 23.) These Guidelines also recommend a minimum five-year probation term for a physician who has committed a misdemeanor that relates substantially to the physician's fitness for practice, but that did not occur during medical practice. (Guidelines, at p. 25.)

6. The matters stated in Finding 11 show that respondent has not yet tested his recovery against the stress of an active medical practice. In addition, the matters stated in Findings 34 and 35 leave some uncertainty as to the most accurate diagnosis and prognosis for respondent. These matters show that an additional period of probation, beyond Ohio's one year, would be appropriate to ensure that respondent continues to be able to practice medicine safely. Respondent's probation conditions should include a requirement that he continue mental health treatment.

7. On the other hand, because the events described in Findings 13 through 18 occurred outside California, the Board's action in this matter occurs only after a substantial delay. If this disciplinary proceeding had occurred promptly after the events causing it, the Board likely would have placed respondent on probation in 2019, rather than in 2021. An order placing respondent on probation until he has shown five

years' recovery is appropriate in this matter, but these five years should begin upon respondent's discharge from intensive outpatient care. For this reason, respondent's probation term will be 35 months rather than five years from the effective date of this decision.

8. The Board's standard terms and conditions of probation include a condition prohibiting supervision of advanced practice nurses or physician assistants. The matters stated in Findings 9, 12, and 37 through 40 demonstrate that such a condition would be unwarranted for respondent.

ORDER

Physician's and Surgeon's Certificate No. A 94230, issued to respondent Allen Michael Amorn, M.D., is revoked. The revocation is stayed, however, and respondent is placed on probation for 35 months upon the following terms and conditions.

1. Psychotherapy

Within 60 calendar days of the effective date of this decision, respondent shall submit to the Board or its designee for prior approval the name and qualifications of a California-licensed board-certified psychiatrist, or California-licensed psychologist who has a doctoral degree in psychology and at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders. Upon approval, respondent shall undergo and continue psychotherapy treatment, including any modifications to the frequency of psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

In the Board's or its designee's sole discretion, the Board or its designee may approve a board-certified psychiatrist, or a psychologist, who is not licensed in California but who demonstrates equivalent qualifications.

The psychotherapist shall consider any information provided by the Board or its designee and any other information the psychotherapist deems relevant and shall furnish a written evaluation report to the Board or its designee. Respondent shall cooperate in providing the psychotherapist any information and documents that the psychotherapist may deem pertinent.

Respondent shall have the treating psychotherapist submit quarterly status reports to the Board or its designee. The Board or its designee may require respondent to undergo psychiatric evaluations by a board-certified psychiatrist appointed by the Board. If, prior to the completion of probation, respondent is found to be mentally unfit to resume the practice of medicine without restrictions, the Board shall retain continuing jurisdiction over respondent's license and the period of probation shall be extended until the Board determines that respondent is mentally fit to resume the practice of medicine without restrictions.

Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

2. Notification

Within seven days of the effective date of this decision, respondent shall provide a true copy of the decision and the accusation in this matter to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to respondent, at any other facility where respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which

extends malpractice insurance coverage to respondent. Respondent shall submit proof of compliance to the Board or its designee within 15 calendar days.

This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

3. Obey All Laws

Respondent shall obey all federal, state, and local laws, and all rules governing the practice of medicine in California. Respondent shall remain in full compliance with any court ordered criminal probation, payments, and other orders.

4. Quarterly Declarations

Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all the conditions of probation.

Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

5. General Probation Requirements

Compliance with Probation Unit: Respondent shall comply with the Board's probation unit and all terms and conditions of this decision.

Address Changes: Respondent shall, at all times, keep the Board informed of respondent's business and residence addresses, email address (if available), and telephone number. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box

serve as an address of record, except as allowed by Business and Professions Code section 2021, subdivision (b).

Place of Practice: Respondent shall not engage in the practice of medicine in respondent's or patient's place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

License Renewal: Respondent shall maintain a current and renewed California physician's and surgeon's license.

Travel or Residence Outside California: Respondent shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) calendar days.

In the event respondent should leave the State of California to reside or to practice respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

6. Interview with the Board or its Designee

Respondent shall be available in person upon request for interviews either at respondent's place of business or at the probation unit office, with or without prior notice throughout the term of probation.

7. Non-Practice While on Probation

Respondent shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of respondent's return to practice. Non-practice is defined as any period of time respondent is not practicing medicine in California as defined in Business and

Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event respondent's period of non-practice while on probation exceeds 18 calendar months, respondent shall successfully complete a clinical training program that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

Respondent's period of non-practice while on probation shall not exceed two years.

Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice will relieve respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws, Quarterly Declarations, and General Probation Requirements.

8. Completion of Probation

Respondent shall comply with all financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation.

Upon successful completion of probation, respondent's certificate shall be fully restored.

9. Violation of Probation

Failure to fully comply with any term or condition of probation is a violation of probation. If respondent violates probation in any respect, the Board, after giving respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed If an accusation, or petition to revoke probation, or an interim suspension order is filed against respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

10. License Surrender

Following the effective date of this decision, if respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy the terms and conditions of probation, respondent may request to surrender his license. The Board reserves the right to evaluate respondent's request and to exercise its discretion in determining whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender, respondent shall within 15 calendar days deliver respondent's wallet and wall certificate to the Board or its designee and respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation. If respondent re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.

11. Probation Monitoring Costs

Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.

DATE: 02/12/2021

Juliet E. Cox

JULIET E. COX

Administrative Law Judge

Office of Administrative Hearings

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BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against: **Allen Michael Amorn, M.D.** **715 E. Western Reserve Road** **Poland, OH 44514** **Physician's and Surgeon's Certificate** **No. A 94230,** Respondent.	Case No. 800-2019-059152 **A C C U S A T I O N**

PARTIES

1. Christine J. Lally (Complainant) brings this Accusation solely in her official capacity as the Interim Executive Director of the Medical Board of California, Department of Consumer Affairs (Board).

2. On March 1, 2006, the Medical Board issued Physician's and Surgeon's Certificate Number A 94230 to Allen Michael Amorn, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on March 31, 2020, unless renewed.

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Board deems proper.

5. Section 2234 of the Code provides that the Board shall take action against any licensee who is charged with "unprofessional conduct," which includes but is not limited to, "[v]iolating . . . any provision of this chapter."

6. Section 2305 of the Code provides, in pertinent part, that the revocation, suspension, or other discipline, restriction, or limitation imposed by another state upon a license to practice medicine issued by that state, or the revocation, suspension, or restriction of the authority to practice medicine by any agency of the federal government, that would have been grounds for discipline in California, shall constitute grounds for disciplinary action for unprofessional conduct.

7. Section 141 of the Code provides:

> (a) For any licensee holding a license issued by a board under the jurisdiction of the department, a disciplinary action taken by another state, by any agency of the federal government, or by another country for any act substantially related to the practice regulated by the California license, may be a ground for disciplinary action by the respective state licensing board. A certified copy of the record of the disciplinary action taken against the licensee by another state, an agency of the federal government, or another country shall be conclusive evidence of the events related therein.
>
> (b) Nothing in this section shall preclude a board from applying a specific statutory provision in the licensing act administered by that board that provides for discipline based upon a disciplinary action taken against the licensee by another state, an agency of the federal government, or another country.

8. Section 2236 of the Code provides that the conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct.

FIRST CAUSE FOR DISCIPLINE

(Discipline, Restriction, or Limitation Imposed by Another State)

9. On July 10, 2019, the State Medical Board of Ohio (Ohio Board) entered a Probationary Consent Agreement (Consent Agreement), attached herewith as Exhibit A, regarding Respondent's license to practice medicine in Ohio. In the Consent Agreement, Respondent admits that he has suffered from depression for many years, but also that he only recently sought treatment. (Exhibit A at p. 2.) Respondent also admits that in December 2018, after failing to take prescribed medication, he contemplated suicide, notified his wife of his plans, threatened to harm her and their children, and produced a knife, with the intent to harm himself, while at a work. (*Ibid.*)

10. Respondent further admits that he was subsequently arrested, received inpatient and outpatient treatment, and pled guilty to two charges of disorderly conduct. (*Ibid.*) Accordingly, the Consent Agreement provides that Respondent is on probation with respect to practicing medicine in Ohio, with specific limitations, and restrictions, including those related to required mental health treatment and reporting. (Exhibit A at pp. 2-8.) In addition, Respondent is precluded from requesting termination of the Consent Agreement for a minimum of one year. (Exhibit A at p. 6.)

11. Respondent's foregoing conduct and the ensuing disciplinary action of the Ohio Board, as set forth in paragraphs 9 and 10 (above) and Exhibit A (attached) constitute cause for discipline, pursuant to section 2234 and/or section 2305 and/or section 141, subdivision (a) of the Code.

SECOND CAUSE FOR DISCIPLINE

(Criminal Conviction as Unprofessional Conduct)

12. By a plea of "no contest," entered in Youngstown Municipal Court in *State of Ohio, City of Youngstown v. Allen Amorn*, Respondent was convicted of two misdemeanors for disorderly conduct as a result of the aforementioned December 2018 incident at his workplace.

13. Respondent is thus subject to disciplinary action under Code sections 2234 and/or 2236 for conviction of a crime substantially related to the qualifications, functions, or duties of a physician and surgeon.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

1. Revoking or suspending Physician's and Surgeon's Certificate Number A 94230, issued to Allen Michael Amorn, M.D.;

2. Revoking, suspending or denying approval of Allen Michael Amorn, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Allen Michael Amorn, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

4. Taking such other and further action as deemed necessary and proper.

DATED: March 11, 2020

CHRISTINE J. LALLY
Interim Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

EXHIBIT A

Probationary Consent Agreement between Allen M. Amorn, M.D. and the State Medical Board of Ohio

State Medical Board of
Ohio

30 E. Broad St., 3rd Floor
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(614) 466-3934
www.med.ohio.gov

CERTIFICATION

I hereby certify that the attached July 10, 2019, Probationary Consent Agreement is a true and complete copy as it appears in the records of the State Medical Board of Ohio in the Matter of **Allen Michael Amorn, M.D.**

This certification is made by authority of the State Medical Board and on its behalf.

Kimberly C. Anderson
Chief Legal Counsel

(SEAL)

September 17, 2019
Date

PROBATIONARY CONSENT AGREEMENT
BETWEEN
ALLEN M. AMORN, M.D.
AND
THE STATE MEDICAL BOARD OF OHIO

This Consent Agreement is entered into by and between Allen M. Amorn, M.D., [Dr. Amorn], and the State Medical Board of Ohio [Board], a state agency charged with enforcing Chapter 4731., Ohio Revised Code.

Dr. Amorn enters into this Consent Agreement being fully informed of his rights under Chapter 119., Ohio Revised Code, including the right to representation by counsel and the right to a formal adjudicative hearing on the issues considered herein.

BASIS FOR ACTION

This Consent Agreement is entered into on the basis of the following stipulations, admissions and understandings:

A. The Board is empowered by Section 4731.22(B), Ohio Revised Code, to limit, revoke, suspend a certificate, refuse to register or reinstate an applicant, or reprimand or place on probation the holder of a certificate for a violation of Section 4731.22(B)(19), Ohio Revised Code, for "[i]nability to practice according to acceptable and prevailing standards of care by reason of mental illness or physical illness, including, but not limited to, physical deterioration that adversely affects cognitive, motor, or perceptive skills."

B. The Board enters into this Consent Agreement in lieu of formal proceedings based upon the violation of Section 4731.22(B)(19), Ohio Revised Code, as set forth in Paragraph (E) below, and expressly reserves the right to institute formal proceedings based upon any other violations of Chapter 4731. of the Revised Code, whether occurring before or after the effective date of this Consent Agreement. Dr. Amorn attests that he has provided a full, complete, and honest account of the circumstances and facts involved in the underlying matter giving rise to this Consent Agreement; that no pertinent information has been withheld from the Board; and that the factual summary contained herein is an accurate representation of the information provided. Further, Dr. Amorn acknowledges he understands that in the event it is subsequently determined that he misrepresented the circumstances or facts of the instant matter, the Board intends to pursue by separate disciplinary action any violation of Section 4731.22(B)(34), Ohio Revised Code, and/or any other violations of the Medical Practices Act, even if such violations arise from the same common nucleus of operative fact contained in this Consent Agreement. Furthermore, Dr. Amorn acknowledges that such subsequent disciplinary action may supersede this Consent Agreement and may result in additional discipline, up to and including permanent revocation of his certificate.

C. Dr. Amorn is licensed to practice medicine and surgery in the State of Ohio, license number 35.124017.

D. Dr. Amorn states that he is also licensed to practice medicine and surgery in the State of California.

E. Dr. Amorn admits that he has suffered from depression for many years, but he only recently sought treatment. Dr. Amorn also admits that, in or around fall 2018, he was prescribed medication, which initially was ineffective, so his physician increased the dose. Dr. Amorn states that he did not like the way the medication made him feel, so he abruptly stopped the medication in or around mid-December 2018. Dr. Amorn states that, within a few days, his depression returned and worsened. In late December 2018, while at work, Dr. Amorn admits he contemplated suicide; he notified his wife of his plans and threatened harm to her and their children. Dr. Amorn admits that the police were summoned, and when they arrived at the hospital, he produced a knife, intending to harm himself. Dr. Amorn admits he was arrested and admitted to the hospital for treatment.

Dr. Amorn states that he was hospitalized for four days, and after his release from the hospital, he sought further treatment. Dr. Amorn states, and the Board acknowledges receipt of information to support, that he successfully completed intensive outpatient treatment in or around February 2019. Dr. Amorn also states, and the Board acknowledges receipt of information to support, that he continues to treat with a psychiatrist and a counselor, and that he is in compliance with all treatment recommendations.

Dr. Amorn admits that, as a result of the aforementioned December 2018 incident, he ultimately pled guilty to two amended charges of Disorderly Conduct. Dr. Amorn also admits he was sentenced to thirty days in jail, all of which were suspended, and he was placed on non-reporting probation for twelve months.

Dr. Amorn states that, on or about February 17, 2019, and April 2, 2019, he was evaluated by Phillip J. Resnick, M.D., a forensic psychiatrist. Dr. Amorn states, and the Board acknowledges receipt of information to support, that Dr. Resnick determined that the incident of late December 2018, likely was precipitated by the abrupt discontinuation of Dr. Amorn's medication. Dr. Resnick further confirmed the diagnosis of Major Depressive Disorder for which Dr. Amorn continues to receive treatment and also determined that Dr. Amorn is psychiatrically stable and can safely practice medicine

AGREED CONDITIONS

Wherefore, in consideration of the foregoing and mutual promises hereinafter set forth, and in lieu of any formal proceedings at this time, Dr. Amorn knowingly and voluntarily agrees with the Board to the following PROBATIONARY terms, conditions and limitations:

GENERAL PROBATIONARY REQUIREMENTS:

1. Dr. Amorn shall obey all federal, state, and local laws, and all rules governing the practice of medicine in Ohio.

2. Dr. Amorn shall submit quarterly declarations under penalty of Board disciplinary action or criminal prosecution, stating whether there has been compliance with all the conditions of this Consent Agreement. The first quarterly declaration must be received in the Board's offices on the first day of the third month following the month in which this Consent Agreement becomes effective, or as otherwise requested by the Board. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.

3. Dr. Amorn shall appear in person for an interview before the full Board or its designated representative during the third month following the effective date of this Consent Agreement. Subsequent personal appearances must occur every three months thereafter, and/or as otherwise requested by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.

4. In the event that Dr. Amorn does not reside or practice in Ohio while subject to the requirements of this Consent Agreement, the Secretary and Supervising Member of the Board, in their sole discretion, may allow this Board's monitoring of Dr. Amorn to be coordinated with an entity or board from another jurisdiction provided the Secretary and Supervising Member determine that such coordination ensures substantial compliance with the requirements of this Consent Agreement.

5. In the event Dr. Amorn is found by the Secretary of the Board to have failed to comply with any provision of this Consent Agreement, and is so notified of that deficiency in writing, such period(s) of noncompliance will be tolled and shall not apply to the reduction of the probationary period under this Consent Agreement. Further, the Secretary and Supervising Member of the Board, in their sole discretion, may enact such tolling for a period of no more than thirty days for each instance of non-compliance that occurs within the first quarter of any failure to comply with the required provisions of this Consent Agreement, and no more than sixty days for each instance of non-compliance that occurs within any subsequent quarter(s) of any failure to comply with the required provisions of this Consent Agreement.

<u>Mental Health Treatment</u>

6. Within thirty days of the effective date of this Consent Agreement, Dr. Amorn shall submit to the Board for its prior aporoval the name and qualifications of a psychiatrist of his choice. Upon approval by the Board, Dr. Amorn shall undergo and continue psychiatric treatment, including individual psychotherapy, at least monthly, or as otherwise directed by the Board. Dr. Amorn shall comply with his psychiatric treatment plan, including taking medications as prescribed and/or ordered. Dr. Amorn shall ensure that psychiatric reports are forwarded by his treating psychiatrist to the Board on a quarterly basis, or as otherwise directed by the Board. The psychiatric reports shall contain information describing Dr. Amorn's current treatment plan and any changes that have been made to the treatment plan since the prior report; Dr. Amorn's compliance with his treatment plan; Dr. Amorn's mental status; Dr. Amorn's progress in treatment; and the results of any laboratory studies that have been conducted since the prior report. Dr. Amorn shall ensure that his treating psychiatrist immediately notifies the Board of his failure to comply with his psychiatric

treatment plan and/or any determination that Dr. Amorn is unable to practice due to his psychiatric disorder. It is Dr. Amorn's responsibility to ensure that quarterly reports are received in the Board's offices no later than the due date for Dr. Amorn's quarterly declaration.

The psychotherapy required as part of Dr. Amorn's psychiatric treatment pursuant to this paragraph may be delegated by Dr. Amorn's treating psychiatrist to an appropriately licensed mental health professional approved in advance by the Board, so long as Dr. Amorn's treating psychiatrist oversees/supervises such psychotherapy; includes information concerning Dr. Amorn's participation and progress in psychotherapy in his or her quarterly reports; and continues to meet personally with Dr. Amorn at least once every three months. Should the psychotherapy required pursuant to this provision be delegated to a licensed mental health professional, Dr. Amorn shall ensure that psychotherapy reports are forwarded by his treating licensed mental health professional to the Board on a quarterly basis, or as otherwise directed by the Board. The psychotherapy reports shall contain information describing Dr. Amorn's current treatment plan and any changes that have been made to the treatment plan since the prior report; Dr. Amorn's compliance with his treatment plan; Dr. Amorn's mental status; Dr. Amorn's progress in treatment; and results of any laboratory studies that have been conducted since the prior report. Dr. Amorn shall ensure that his treating licensed mental health professional immediately notifies the Board of his failure to comply with his psychotherapy treatment plan and/or any determination that Dr. Amorn is unable to practice due to his psychiatric disorder. These psychotherapy reports shall be in addition to the reports submitted by Dr. Amorn's treating psychiatrist. It is Dr. Amorn's responsibility to ensure that all quarterly reports are received in the Board's offices no later than the due date for Dr. Amorn's quarterly declaration.

In the event that the designated treating psychiatrist and/or licensed mental health professional becomes unable or unwilling to serve in this capacity, Dr. Amorn must immediately so notify the Board in writing. In addition, Dr. Amorn shall make arrangements acceptable to the Board for another treating psychiatrist and/or licensed mental health professional within thirty days after the previously designated treating psychiatrist and/or licensed mental health professional becomes unable or unwilling to serve, unless otherwise determined by the Board. Furthermore, Dr. Amorn shall ensure that the previously designated treating psychiatrist and/or licensed mental health professional also notifies the Board directly of his or her inability to continue to serve and the reasons therefore.

The Board expressly reserves the right to disapprove any psychiatrist proposed to serve as Dr. Amorn's designated treating psychiatrist and/or any licensed mental health professional proposed to serve as Dr. Amorn's designated treating licensed mental health professional, or to withdraw approval of any such psychiatrist or licensed mental health professional previously approved to serve as Dr. Amorn's designated treating psychiatrist or licensed mental health professional, in the event that the Secretary and Supervising Member of the Board determine that any such psychiatrist or licensed mental health professional has demonstrated a lack of cooperation in providing information to the Board or for any other reason.

7. The Board retains the right to require, and Dr. Amorn agrees to submit biological materials (including but not limited to blood, urine, hair, saliva, breath, or fingernail samples) for screening for drugs and alcohol, for analysis of therapeutic levels of medications that may be prescribed for Dr. Amorn, or for any other purpose, at Dr. Amorn's expense upon the Board's request and without prior notice. Dr. Amorn's refusal to timely submit a specimen upon request of the Board shall result in a minimum of one year of actual license suspension. Further, the collection of such specimens shall be witnessed by a representative of the Board, or another person acceptable to the Secretary or Supervising Member of the Board.

Releases

8. Dr. Amorn shall provide authorization, through appropriate written consent forms, for disclosure of evaluative reports, summaries, and records, of whatever nature, by any and all parties that provide treatment or evaluation for Dr. Amorn's mental health or related conditions, or for purposes of complying with this Consent Agreement, whether such treatment or evaluation occurred before or after the effective date of this Consent Agreement. To the extent permitted by law, the above-mentioned evaluative reports, summaries, and records are considered medical records for purposes of Section 149.43 of the Ohio Revised Code and are confidential pursuant to statute. Dr. Amorn further agrees to provide the Board written consent permitting any treatment provider from whom he obtains treatment to notify the Board in the event he fails to agree to or comply with any treatment contract or aftercare contract. Failure to provide such consent, or revocation of such consent, shall constitute a violation of this Consent Agreement.

REQUIRED REPORTING BY LICENSEE

9. Within thirty days of the effective date of this Consent Agreement, Dr. Amorn shall provide a copy of this Consent Agreement to all employers or entities with which he is under contract to provide health care services (including but not limited to third party payors) or is receiving training, and the Chief of Staff at each hospital where he has privileges or appointments. Further, Dr. Amorn shall promptly provide a copy of this Consent Agreement to all employers or entities with which he contracts to provide health care services, or applies for or receives training, and the Chief of Staff at each hospital where he applies for or obtains privileges or appointments. In the event that Dr. Amorn provides any health care services or health care direction or medical oversight to any emergency medical services organization or emergency medical services provider, within thirty days of the effective date of this Consent Agreement, Dr. Amorn shall provide a copy of this Consent Agreement to the Ohio Department of Public Safety, Division of Emergency Medical Services. Further, within thirty days of the date of each such notification, Dr. Amorn shall provide documentation acceptable to the Secretary and Supervising Member of the Board demonstrating that the required notification has occurred.

10. Within thirty days of the effective date of this Consent Agreement, Dr. Amorn shall provide a copy of this Consent Agreement by certified mail to the proper licensing authority of any state or jurisdiction in which he currently holds any professional license, as well as any federal agency or entity, including but not limited to the Drug

Enforcement Agency, through which he currently holds any license or certificate. Dr. Amorn further agrees to provide a copy of this Consent Agreement by certified mail at the time of application to the proper licensing authority of any state in which he applies for any professional license or for reinstatement of any professional license. Additionally, within thirty days of the effective date of this Consent Agreement, Dr. Amorn shall provide a copy of this Consent Agreement to any specialty or subspecialty board of the American Board of Medical Specialties or the American Osteopathic Association Bureau of Osteopathic Specialists under which he currently holds or has previously held certification. Further, within thirty days of the date of each such notification, Dr. Amorn shall provide documentation acceptable to the Secretary and Supervising Member of the Board demonstrating that the required notification has occurred.

11 Dr. Amorn shall promptly provide a copy of this Consent Agreement to all persons and entities that provide Dr. Amorn mental health treatment or monitoring. Further, within thirty days of the date of each such notification, Dr. Amorn shall provide documentation acceptable to the Secretary and Supervising Member of the Board demonstrating that the required notification has occurred.

12. Dr. Amorn shall notify the Board in writing of any change of principal practice address or residence address within thirty days of such change.

FAILURE TO COMPLY

If, in the discretion of the Secretary and Supervising Member of the Board, Dr. Amorn appears to have violated or breached any term or condition of this Consent Agreement, the Board reserves the right to institute formal disciplinary proceedings for any and all possible violations or breaches, including, but not limited to, alleged violations of the laws of Ohio occurring before the effective date of this Consent Agreement.

If the Secretary and Supervising Member of the Board determine that there is clear and convincing evidence that Dr. Amorn has violated any term, condition or limitation of this Consent Agreement, Dr. Amorn agrees that the violation, as alleged, also constitutes clear and convincing evidence that his continued practice presents a danger of immediate and serious harm to the public for purposes of initiating a summary suspension pursuant to Section 4731.22(G), Ohio Revised Code.

DURATION/MODIFICATION OF TERMS

Dr. Amorn shall not request termination of this Consent Agreement for a minimum of one year. In addition, Dr. Amorn shall not request modification to the probationary terms, limitations, and conditions contained herein for at least one year, except that Dr. Amorn may make such request with the mutual approval and joint recommendation of the Secretary and Supervising Member. Otherwise, the above-described terms, limitations and conditions may be amended or terminated in writing at any time upon the agreement of both parties.

In the event that the Board initiates future formal proceedings against Dr. Amorn, including but not limited to issuance of a Notice of Opportunity for Hearing, this Consent Agreement shall continue in full force and effect until such time that it is superseded by ratification by the Board of a subsequent Consent Agreement or upon this Consent Agreement being superseded by a subsequent final Board Order taking effect.

In the event that any term, limitation, or condition contained in this Consent Agreement is determined to be invalid by a court of competent jurisdiction, Dr. Amorn and the Board agree that all other terms, limitations, and conditions contained in this Consent Agreement shall be unaffected.

ACKNOWLEDGMENTS/LIABILITY RELEASE

By executing his signature on this Consent Agreement, Dr. Amorn agrees that in the event the Board, in its discretion, does not ratify this Consent Agreement, this settlement offer is withdrawn and shall be of no evidentiary value and shall not be relied upon or introduced in any disciplinary action or appeal by either party. Dr. Amorn and the Board further agree that if this Consent Agreement is not approved, it shall not constitute an admission against interest in this proceeding and shall not prejudice the ability of the Board to adjudicate this matter.

This Consent Agreement represents the sole and entire agreement of the parties hereto and supersedes all prior written or oral negotiations, agreements, or understandings between the parties. No party to this Agreement has been induced to enter into the Consent Agreement by any representations or inducements except those expressly set forth in this written Agreement. Further, all parties agree that to the extent any language in the Agreement will be interpreted in a subsequent dispute, no ambiguous language shall be construed against the party drafting this Consent Agreement.

Dr. Amorn acknowledges that he has had an opportunity to ask questions concerning the terms of this Consent Agreement and that all questions asked have been answered in a satisfactory manner.

Any action initiated by the Board based on alleged violations of this Consent Agreement shall comply with the Administrative Procedure Act, Chapter 119., Ohio Revised Code.

Dr. Amorn hereby releases the Board, its members, employees, agents, officers and representatives jointly and severally from any and all liability arising from the within matter.

This Consent Agreement shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. Further, this information may be reported to appropriate organizations, data banks and governmental bodies. Dr. Amorn acknowledges that his social security number will be used if this information is so reported and agrees to provide his social security number to the Board for such purposes

EFFECTIVE DATE

It is expressly understood that this Consent Agreement is subject to ratification by the Board prior to signature by the Secretary and Supervising Member and shall become effective upon

the last date of signature below. Further, Dr. Amorn specifically acknowledges that the electronic transmission of a scanned or photostatic copy of any executed signature to this Consent Agreement, upon being received by the Board, shall be deemed to have the full legal force and effect as the original.

ALLEN M. AMORN, M.D.

7-3-19
DATE

KIM G. ROTHERMEL, M.D.
Secretary

7-10-2019
DATE

ELIZABETH Y. COLLIS
Attorney for Dr. Amorn

7/8/19
DATE

BRUCE R. SAFERIN, D.P.M.
Supervising Member

7-10-19
DATE

CHERYL D. POKORNY
Enforcement Attorney

7/8/19
DATE