

Upholding the Standard: Professionalism and Regulatory Compliance with the State Medical Board of Ohio

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Objectives

- 1) Understand the Board's framework and standards for conduct, including Ohio's Medical Practice Act and accompanying regulations.
- 2) Articulate the key steps of the Board's complaint and disciplinary process.
- 3) Identify and mitigate behaviors and circumstances that lead to investigations and/or Board action through case examples.

Mission Statement

To protect and enhance the health and safety of the public through effective medical regulation.

The Board

The Medical Board is the state agency charged with regulating the practice of medicine and several allied health professions.

12 members appointed by the governor to 5-year terms:

- 9 doctors: 7 MDs, 1 DO, and 1 DPM
- 3 consumer members

The board meets the second Wednesday of each month in the Rhodes Tower and livestreams the meetings on its YouTube channel.



License Types

The Medical Board regulates more than 103,000 licensees.

Allopathic Physicians 46,566	Anesthesiologist Assistants 447	Massage Therapists 11,319
Osteopathic Physicians 8,876	Physician Assistants 6,681	Dietitians 5,286
Podiatric Physicians 988	Radiologist Assistants 23	Acupuncturists 316
Training Certificates MD-DO-DPM 9,928	Genetic Counselors 694	Respiratory Care 8,984

Legal Authority

Statutes

Laws enacted by the Ohio legislature

Ohio Revised Code (ORC)

Rules

Regulations created by the State Medical Board

Ohio Administrative Code (OAC)

Rules clarify and amplify laws

Standard of Care

Evidentiary proof through expert testimony

Ohio Revised Code

The Ohio Revised Code enumerates the grounds for board disciplinary action.

It also establishes the confidentiality of complaints and the investigative process.



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Keywo

Section 4731.22 | Disciplinary actions.

[Ohio Revised Code](#) / [Title 47 Occupations-Professions](#) / [Chapter 4731 Physicians; Limited Practitioners](#)

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Effective: October 3, 2023 *Latest Legislation:* House Bill 53 - 135th General Assembly *PDF:* [Download Authenticated PDF](#)

(A) The state medical board, by an affirmative vote of not fewer than six of its members, may limit, revoke, or suspend a license or certificate to recommend, refuse to grant a license or certificate, refuse to renew a license or certificate, refuse to reinstate a license or certificate, place on probation the holder of a license or certificate if the individual applying for or holding the license or certificate is found by the board to have committed fraud during the administration of the examination for a license or certificate to practice or to have committed fraud, misrepresentation, or other act prohibited by law, for, renewing, or securing any license or certificate to practice or certificate to recommend issued by the board.

(B) Except as provided in division (P) of this section, the board, by an affirmative vote of not fewer than six members, shall, to the extent provided by law, revoke, or suspend a license or certificate to practice or certificate to recommend, refuse to issue a license or certificate, refuse to renew a license or certificate, refuse to reinstate a license or certificate, or reprimand or place on probation the holder of a license or certificate for one or more of the following reasons:

The Medical Practice Act

- Improper prescribing or dispensing of drugs
- Medical care that falls below minimal standards of care
- Sexual misconduct, including inappropriate touching or comments
- Fraud or deception
- Unlicensed practice
- Criminal convictions or criminal acts
- Impairment of ability to practice due to drugs, alcohol, or other physical or mental health issues
- Continuing education violations
- Failure of a health care facility or health care professional to report violations of the Medical Practice Act



State Medical Board of Ohio

Ohio Administrative Code

The Ohio Administrative Code establishes standards of care for specific circumstances, provides licensure and continuing education requirements, and creates operational requirements for the Board.

Ohio Administrative Code

Chapter

Chapter 4731-1 | Limited Branches of Medicine or Surgery

Chapter 4731-2 | Notice of Adoption, Amendment, or Rescission of Rule

Chapter 4731-4 | Criminal Records Checks

Chapter 4731-6 | Medical or Osteopathic License

Chapter 4731-7 | Notice of Meetings

Chapter 4731-8 | Personal Information Systems

Chapter 4731-9 | Recordation of Meetings

Chapter 4731-10 | Licensing; Continuing Education



<https://codes.ohio.gov>

Chapter 4731-14 | Pronouncement of Death

Chapter 4731-15 | Reporting Requirements

Chapter 4731-16 | Impaired Practitioners

Chapter 4731-17 | Exposure-Prone Invasive Procedure Precautions

Chapter 4731-18 | Surgery Standards

Chapter 4731-20 | Surgery Privileges of Podiatrist

Chapter 4731-22 | Retired License Status

Chapter 4731-23 | Delegation of Medical Tasks

Chapter 4731-24 | Anesthesiologist Assistants

Chapter 4731-25 | Office Based Surgery



Complaints and Investigations



What is a complaint?

An allegation of licensee misconduct received by the Medical Board.

The board received 6,720 complaints in FY25.

Complaints are confidential.

Examples of Allegations



Sexual misconduct



Inappropriate
prescribing



Criminal actions



Standard of care



Patient privacy



Impairment

Complaint processing

Complaints come through the web portal, email, or the confidential hotline.

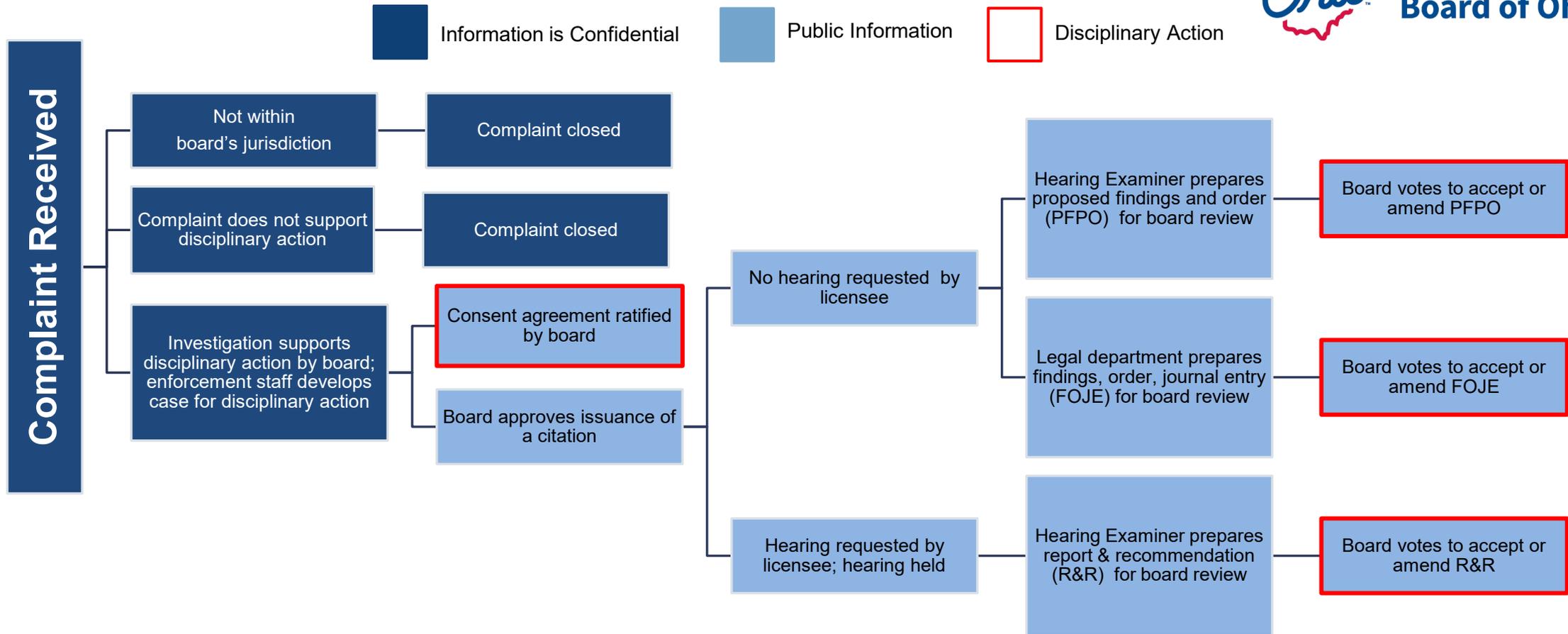
After the complaint is prepped by the intake team, it is routed according to the allegation:

- 26 field investigators handle the majority of complaints.
- 2 nurse investigators and a medical director review standard of care complaints.
- A team of enforcement attorneys process complaints that are legal in nature (e.g., actions taken by another state or healthcare agency or licensure eligibility).

The Licensee's Role in the Investigation

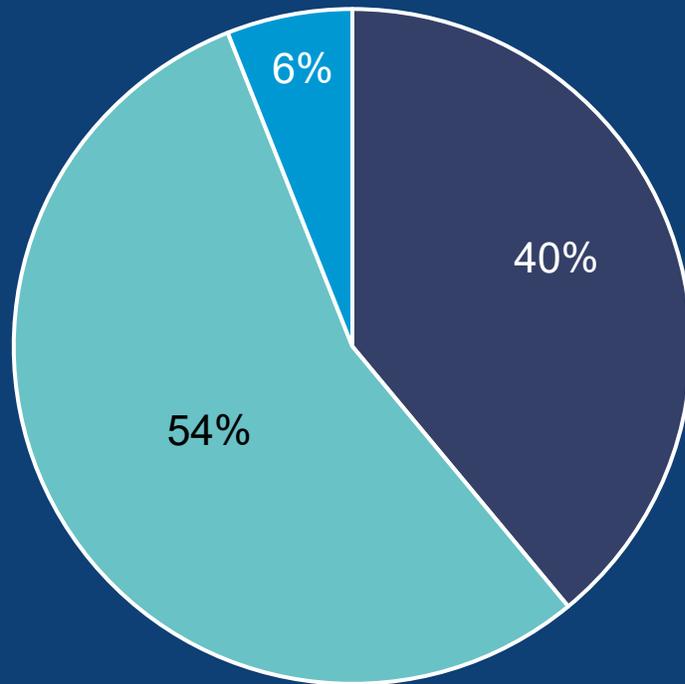


- You have a legal duty to cooperate with a Board investigation (ORC 4731.22(B)(34)).
- You have the right to counsel; we encourage you to seek counsel.
- Investigations include, but aren't limited to, subpoena responses for documents, interviews with an investigator, interrogatories, and depositions.
- All investigatory material obtained by the Board is confidential.



The Enforcement and Disciplinary Process

FY 25 Complaint Outcomes



No action warranted

2,555 (40%) complaints closed as the issue involved a profession not regulated by the board or closed pursuant to established protocol.

Investigated, then closed

3,429 (54%) complaints were closed after investigation. Although there was no formal discipline, the licensee may have received a caution or education letter, met with board Secretary and Supervising Member or been referred to further education.

Board action

376 (6%) complaints resulted in disciplinary action by the board.

	Clinical Research Faculty Certificate	MD	DO	DPM	L1 Limited Permit	LD	MT	PA	RCP	Training Certificate (MD)	Total Actions
Application Approved		2					3			1	6
Application Conditionally Approved		2	2	1			10				15
Cite Dismissed		10							1		10
Denial	1	1			1		3				3
Permanent Denial			1				1	1			3
Permanent Revocation or Permanent Surrender		46	10	1			16	5	3		81
Permanent Withdrawal		3					1				4
Probation		9	2	1							12
Reprimand		26	2	1			3				32
Revocation		7	1				1		3		9
Suspension (Definite)		2	2	1			6	1			12
Suspension (Indefinite)		14	2			1	7	1	3		15
Total per License Type	1	122	22	5	1	1	51	8	10	1	222

Board Actions are Public Record

Board actions are published to:

- elicense.ohio.gov
- Monthly formal action list (med.ohio.gov)
- Monthly newsletter to licensees

Recent Board Actions

Case: Standard of Care

Dr. F was board certified in radiology and held certificates of qualification in interventional radiology. He left his hospital affiliation and opened an aesthetic medicine practice.

After taking courses in liposuction and breast augmentation, he began offering awake tummy tuck procedures and hormone replacement therapy and sometimes prescribed Adipex.

The board cited him with respect to the treatment of 9 patients:

- Inappropriate and/or inadequate management of patients' conditions, and/or inappropriate and/or inadequate monitoring of patients' medications
- A failure to provide appropriate care and/or treatment to patients
- Inappropriate prescribing; and/or
- Inadequate and/or incomplete documentation.

Board action: Permanent Revocation and \$3,500 Fine.



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Problem Prescribing

- Inappropriately prescribing drugs to patients
- Selling, giving away, personally furnishing, prescribing, or administering drugs for other than legal and legitimate therapeutic purposes
- Standard of Care - departing from, or the failing to conform to, minimal standards of care of similar practitioners under the same or similar circumstances
- Self & family prescribing of controlled substances
- Drug Conviction - a violation of any federal or state law regulating the possession, distribution, or use of any drug
- Rules Violation - violating Board rule(s)
- OARRS (Ohio Automated Rx Reporting System) violations

Case: Prescribing

Dr. C is a critical care physician and surgeon. He admitted he prescribed medications, including controlled substances, to his significant other (establishing a patient relationship) during a three-year period and that he did not prepare or maintain a record of those prescriptions. He also prescribed to her mother without documenting the prescriptions, examinations or evaluations, or treatment.

Board action: Reprimand, 12-month probation and controlled substance prescribing and medical record keeping course.



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Rx

PATIENT NAME: _____

ADDRESS: _____

F

Rx

Medic



Case: Prescribing

Dr. N is board certified in neurology and occupational medicine. For 6 patients, he admitted to:

- failure to appropriately document treatment
- inappropriate or excessive prescribing of controlled substances; and
- inadequate monitoring of patients' medications or conditions, or adequately explaining or justifying reasons for prescribed medications or doses.

Board action: 6-month suspension, completion of educational courses and a \$5,000 fine.



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Rx

PATIENT NAME: _____

ADDRESS: _____

F

Rx

Medic

Documentation

ORC 4731.22 (B) (6): A departure from, or the failure to conform to, minimal standards of care of similar practitioners under the same or similar circumstances, whether or not actual injury to a patient is established

OAC 4731-37-01 (C) (7): (C) A health care professional shall comply with all standard of care requirements to provide telehealth services to a patient including but not limited to...(7) The health care professional shall promptly document in the patient's medical record the patient's or, if applicable, the patient's legal representative, consent for telehealth treatment, pertinent history, evaluation, diagnosis, treatment plan, underlying conditions, any contraindications, and any referrals to appropriate health care providers, including primary care providers or health care facilities.

Case: Documentation

Dr. D is board certified in gastroenterology and internal medicine.

The board identified nine patients treated by Dr. D for whom he failed to appropriately document the treatment, what they reported to him and/or results of testing. The board's expert also noted instances where his treatment did not meet the standard of care and was not indicated.

Board action: Indefinite suspension, \$3,500 fine, completion of medical records and professional records courses, limitations for at least one year.



Supervision/Collaboration

Physician Assistants: ORC 4730.19 (A)

The agreement shall clearly state that the supervising physician is legally responsible and assumes legal liability for the services provided by the physician assistant. The agreement shall be signed by the physician and the physician assistant.

Nurse Practitioners: OAC 4723-8-04 (B):

(B) Except as provided in paragraph (C) of this rule, a certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist engaged in the practice of the nurse's specialty, shall enter into a written standard care arrangement with one or more collaborating physicians or podiatrists whose practice is the same or similar to the nurse's practice.

Case: Physician Supervision

Dr. E is an emergency medicine physician and holds a license in more than two dozen states.

Dr. E was the Medical Director for a company that provided IV hydration and vitamins. He described it as a mobile franchise staffed by nurses, nurse practitioners or physician assistants. He did not meet with patients. His credentials were used to prescribe and order the compounded preparations from the pharmacy. The company also used his “standing orders”.

Board action: Indefinite suspension, completion of required pharmacology and professional ethics courses, \$3,500 fine, probation and limitations



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Case: Physician Supervision

Dr. M is board certified in family medicine. He supervised a physician assistant. For about 18-months, the PA prescribed schedule II-controlled substances to 11 patients without appropriate supervision or approval by Dr. L as his supervising physician, and without the prescriptive authority given to Physician Assistants as set forth in the Ohio Revised Code and Ohio Administrative Code.

Board action: 180-day suspension and permanent restriction from entering in a Supervision Agreement with any physician assistant or other licensed healthcare professional, educational courses, and payment of a five thousand dollar (\$5,000.00) fine.



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Sexual Misconduct

OAC 4731-26-01 definition:

“conduct that exploits the licensee-patient relationship in a sexual way, whether **verbal or physical**, and may include the **expression of thoughts, feelings, or gestures** that are sexual or that reasonably may be construed by a patient as sexual. Sexual misconduct includes sexual impropriety, sexual contact, or sexual interaction”

Case: Sexual Misconduct

Dr. F was board certified in neurology. Around April 26, 2019, he performed a breast exam on a patient, who had been referred to him for a neurological exam. Dr. F neglected to employ disrobing or draping practices respecting the patient's privacy, to provide a chaperone, to appropriately explain the reason for the breast exam to the patient, and to properly document the reason and the result of the breast exam in the patient record. However, Dr. F asserted that the breast examination and the questions he posed to the patient were clinically appropriate.

Patient 1 asserted that the way Dr. F touched her breasts was different than any other breast examination she had received in the past by other physicians, and that she perceived his conduct as being sexual in nature. She also said that he asked her questions about her sexual function in a crude manner.

Board action: Permanent revocation and \$6,000 fine



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Impairment

Inability to practice according to acceptable standards of care by reason of mental illness, mental disorder, or physical illness, including but not limited to physical deterioration that adversely affects cognitive, motor, or perceptive skills. Impairment includes the inability to practice in accordance with such standards without appropriate treatment, monitoring, or supervision. (ORC 4731.22 (B)(19) and/or (B)(26).

Case: Impairment

ORC 4731.25 (B): The state medical board shall establish a **confidential, nondisciplinary** program for the evaluation and treatment of practitioners and applicants who are, or may be, impaired and also meet the eligibility conditions described in section 4731.252 or 4731.253 of the Revised Code. The program shall be known as the confidential monitoring program.



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Duty to Report

Duty to Report

Licensees have a personal duty to report to the State Medical Board of Ohio when they believe an individual licensed by the Board has violated the Board's laws or rules including **sexual misconduct, impairment, practice below the minimal standards of care, and improper prescribing of controlled substances.**

Reports of misconduct to supervisors, law enforcement or health care system management do **NOT** fulfill the duty to report to the Board; failure to report could result in formal disciplinary action.



Health Care Facilities Reporting Requirements



Old Requirement:

A health care facility must report a disciplinary action of a Board licensee within 60 days.

New Requirement:

A health care facility must report a disciplinary action of a Board licensee within 30 days.

A health care facility must report investigations involving criminal conduct or sexual misconduct against a Board licensee within 30 days of beginning the investigation.

Case: Duty to Report

Doctor knew for almost 3 years that his partner and co-owner of their pain management practice was accused of engaging in sexual misconduct with female patients during medical exams.

He failed to report his partner's inappropriate sexual conduct to the Medical Board.

Board action: Permanent revocation

INVESTIGATIONS

Medical Board revokes license of second doctor at controversial pain clinic

The Ohio Medical Board has revoked the license of Dr. Robert S. Geiger, a partner and co-owner of a controversial pain management clinic in Stow, Ohio.

Author: Tom Meyer (M)
Published: 5:55 PM EDT
Updated: 7:00 PM EDT

STOW, Ohio -- The Ohio Medical Board has revoked the license of Dr. Robert S. Geiger.

The action was taken after the board found Geiger guilty of sexual misconduct with female patients during medical exams.

The board said Geiger engaged in sexual misconduct with female patients during medical exams.

MEDICAL BOARD RECORD—35.051474

LICENSE STATUS/DISCIPLINARY ACTIONS—*License Inactive; see [board actions](#) at the bottom of this blog post.*

Ohio doctor doesn't report pal's sexual abuse, loses license

Rarely do doctors pay the ultimate professional price for keeping quiet about sex abuse. But this spring, the code of silence cost one physician his medical license.

In March, Ohio revoked the license of **Dr. Robert S. Geiger** for failing to report complaints that his colleague **James Bressi** was sexually abusing female patients at their pain clinic.

"We don't see this kind of thing," said Dr. Anita Steinbergh, who has served on the state medical board for 23 years. "This is a very different case."

Among the evidence against Geiger was a rare trove of first-hand testimony from both patients and employees — as well as letters, written by Geiger himself, scolding Bressi. They laid out Geiger's apparent motive: concern not for patients, but for his friend and medical practice.



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File a Complaint

Visit med.ohio.gov

or

Call the Confidential
Complaint Hotline at
1-833-333-SMBO (7626)

Avoiding an Action

- ✓ Standard of Care: Stay in your area of training, expertise, board certification, etc.
- ✓ Standard of Care: Documentation matters, even (especially) for telehealth
- ✓ Prescribing: Standard of care, Administrative code rules, OARRS checks
- ✓ Supervision/Collaboration: Know what your APP is doing
- ✓ Supervision/Collaboration: Don't be an absentee Medical Director
- ✓ Sexual Misconduct: Draping, Chaperones, Comments, Touching, Relationships
- ✓ Criminal Activity: Conviction isn't necessary for the Board to take action
- ✓ Impairment: Work with OhioPHP
- ✓ Duty to Report



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Questions?

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