

MINUTES
Monthly Meeting
MEDICAL LICENSURE COMMISSION OF ALABAMA
Meeting Location: 848 Washington Avenue
Montgomery, Alabama 36104

June 25, 2025

MEMBERS PRESENT IN PERSON

Paul M. Nagrodzki, M.D., Vice-Chairman
Kenneth W. Aldridge, M.D.
Craig H. Christopher, M.D.
Howard J. Falgout, M.D.
L. Daniel Morris, Esq
Nina Nelson-Garrett, M.D
Pamela Varner, M.D.

MEMBERS NOT PRESENT

Jorge Alsip, M.D., Chairman

MLC STAFF

Aaron Dettling, General Counsel, MLC
Rebecca Robbins, Operations Director (Recording)
Nicole Roque, Administrative Assistant (Recording)
Heather Lindemann, Licensure Assistant

OTHERS PRESENT

BME STAFF

Rebecca Daniels, Investigator
Randy Dixon, Investigator
Amy Dorminey, Director of Operations
Greg Hardy, Investigator
Alicia Harrison, Associate General Counsel
Chris Hart, Technology
Effie Hawthorne, Associate General Counsel
Wilson Hunter, General Counsel
Roland Johnson, Physician Monitoring
Sally Knight, Physician Monitoring
Stephen Lavender, Investigator
William Perkins, Executive Director
Ben Schlemmer, Investigator
Tiffany Seamon, Director of Credentialing



Call to Order: 9:02 a.m.

Prior notice having been given in accordance with the Alabama Open Meetings Act, and with a quorum of seven members present, Commission Vice-Chairman, Paul Nagrodzki, M.D. convened the monthly meeting of the Alabama Medical Licensure Commission.

OLD BUSINESS

Minutes May 28, 2025

Commissioner Aldridge made a motion that the Minutes of May 28, 2025, be approved. A second was made by Commissioner Varner. The motion was approved by unanimous vote.

NEW BUSINESS

Full License Applicants

<u>Name</u>	<u>Medical School</u>	<u>Endorsement</u>
1. Kathryn E Anthony	Louisiana State University School of Medicine New Orleans	USMLE
2. Buse Baykoca Arslan	Yeditepe Manisa Celal Bayar University	USMLE
3. Danielle Tabeth Betz	Jefferson Medical College	USMLE/PA
4. Ela Bicki	Istanbul University Cerrahpasa	USMLE
5. Sellers Colton Boudreau	University of Alabama School of Medicine Birmingham	USMLE/KY
6. Jeremy Craig Brown	A.T. Still Univ School of Osteopathic Medicine in Arizona (SOMA)	COMLEX/CA
7. Erin Leigh Burton	Texas Tech University Health Sciences Center School of Medicine	USMLE
8. Priscilla Anne Caldwell	University of Tennessee Memphis College of Medicine	USMLE/VA
9. Madison D Cannon	University of Alabama School of Medicine Birmingham	USMLE/TX
10. Daniel James Ceglowski	University of Texas Southwestern Medical Center at Dallas	USMLE/MI
11. Debbie Chavez-Mitchell	St. Matthews University	USMLE/NC
12. Yu-Yun Carmen Chen	New York College of Osteopathic Medicine	COMLEX
13. Laura Chavez Columbus	Drexel University College of Medicine	USMLE/VA
14. Kishan Ramesh Darji	The Brody School of Medicine at East Carolina University	USMLE/NC
15. Michael Grant Day	Louisiana State University School of Medicine New Orleans	USMLE/LA
16. Bhumi Rajendra Desai	University of Queensland	USMLE/LA
17. Robin Narendra Dharia	University of Miami Miller School of Medicine	USMLE/GA
18. Sherri Michele English	Cooper Medical School of Rowan University	USMLE/CA
19. Jami Dawn Feltner	St. James School of Medicine	USMLE/SC
20. Kiondra Rashun Fisher	University of Maryland	USMLE/LA
21. Joel Thomas Funk	Northwestern University	USMLE/AZ
22. Kaitlyn Janssen Gagat	University of Alabama School of Medicine Birmingham	USMLE/TN
23. Kimberly Renee Gardner	University of North Carolina at Chapel Hill School of Medicine	USMLE/TX
24. Ryan Eric Glass	Rosalind Franklin University	USMLE/NY
25. Emmy Anne Graham	Alabama College of Osteopathic Medicine	COMLEX
26. Evan Flanigan Guay	Michigan State University	COMLEX/CO
27. Jason Tyler Hall	Edward Via College of Osteopathic Medicine Auburn	COMLEX

<u>Name</u>	<u>Medical School</u>	<u>Endorsement</u>
28. Ricardo Javier Hernandez	Ponce School of Medicine	USMLE/FL
29. Luke James Higgins	Stanford University	USMLE/MD
30. Farrukh Javed	Punjab Medical College	USMLE/TX
31. Leroy Jemison	University of Central Florida College of Medicine	USMLE
32. Ansh Johri	Pennsylvania State University	USMLE/MS
33. Emily J Kao	Case Western Reserve University	USMLE/CA
34. Jasper Truett Kennedy	University of Alabama School of Medicine Birmingham	USMLE/WA
35. Allison Kimball Key	Mercer University School of Medicine	USMLE/GA
36. Marianna Henry Khoury	Case Western Reserve University	USMLE
37. Edward Woochang Kim	Ben-Gurion University of The Negev	USMLE
38. Lonnie Wayne Lassiter II	Brody School of Medicine at East Carolina University	USMLE
39. Kristin Heather King	University of Hawaii School of Medicine	USMLE/CA
40. Karyn Lynn Leniek	University of Illinois College of Medicine - Rockford	USMLE/NC
41. Rachel Ilana Levine	Edward Via College of Osteopathic Medicine Auburn	COMLEX
42. Andrew Lin	Western Univ of Health Sciences, College of Osteo Med of the Pacific	COMLEX/CA
43. Alexandra C Livingston	William Carey University College of Osteopathic Medicine	COMLEX/CA
44. Amy Nicole Macher	Ross University	USMLE/NY
45. Hicks Corey Manson	East Tennessee State University James H. Quillen College of Medicine	USMLE/VA
46. Jonathan Marcus	Univ of Med and Dentistry New Jersey R W Johnson Med School	USMLE/NJ
47. Alexandra Martins	Tufts University School of Medicine	USMLE/NY
48. Kelly Christopher McCants	Meharry Medical College School of Medicine	USMLE/KY
49. Jonathan C McCollum	University of Alabama School of Medicine Birmingham	USMLE/IN
50. Joseph Samuel McIlwain	University of Alabama School of Medicine Birmingham	USMLE/NC
51. Zankhan R Mirani	NHL Municipal Medical College	USMLE/DC
52. Bina Iqbal Mustafa	Liaquat University of Medical and Health Sciences	USMLE/NY
53. Christopher Duc Nguyen	Keck School of Medicine of the University of Southern California	USMLE/CA
54. Roshan Ashokkumar Patel	B.J. Medical College	USMLE/NJ
55. Kelsey Claire Patterson	University of Alabama School of Medicine Birmingham	USMLE
56. Luis Alberto Pina Martina	Ibero-American University	USMLE
57. Tracey Pu	Wake Forest School of Medicine	USMLE/MD
58. Yashwanth Reddy Pulluru	Mamata Medical College	USMLE
59. David Chester Reisner	Sidney Kimmel Medical College	USMLE/MD
60. Ayesha Riaz	St. George's University	USMLE/AR
61. Diana Alejandra Rios	Mercer University School of Medicine	USMLE
62. Jeffrey Adam Sadowsky	Carol Davila University of Medicine and Pharmacy	FLEX
63. Mariya Saify	Late Baliram Kashyap Memorial Government Medical College	USMLE/MN
64. Michelle Zeva Schultz	University of Massachusetts Medical School	NBME/MO
65. Vikram Sengupta	Yale University School of Medicine	USMLE/NY
66. Payal Chandresh Shah	NYU Grossman School of Medicine	USMLE
67. Logan Christian Shelnutt	University of Virginia School of Medicine	USMLE/UT
68. Onur Erk Taparli	Istanbul University Cerrahpasa	USMLE
69. Jaida Lynn West	University of Alabama School of Medicine Birmingham	USMLE
70. Phillip James Williams	Schulich School of Medicine and Dentistry, Western University	LMCC
71. Crystal Renee Worsena	Kansas City University of Medicine and Biosciences	COMLEX/MO
72. Sikander Zulqarnain	Dow Medical College	USMLE/NY

<u>Name</u>	<u>Medical School</u>	<u>Endorsement</u>
73. Jeffrey Vincent Jones	Wright State University School of Medicine	USMLE/OH
74. Jonathan Lowentritt Kaplan	Louisiana State University School of Medicine	USMLE/LA
75. *Saad Khan	University of Alabama School of Medicine	USMLE
76. Samuel Lory Stahly	Arkansas College of Osteopathic Medicine	COMLEX
77. *George Zabakolas	Ross University	USMLE

**Approved pending acceptance and payment of NDC issued by the BME.*

A motion was made by Commissioner Christopher with a second by Commissioner Nelson-Garrett to approve applicant numbers one through seventy-seven (1-77) for full licensure. The motion was approved by unanimous vote.

Limited License Applicants

<u>Name</u>	<u>Medical School</u>	<u>End.</u>	<u>Location</u>	<u>License</u>
1. Charles Nolan Ahlrich	University of Mississippi Jackson	LL/AL	USA Health Surgery	R
2. Mahmoud Ahmad	Alexandria University	LL/AL	Southeast Health IM	R
3. Malik Kashif Ahmad	Shifa College of Medicine	LL/AL	UA Selma FM	R
4. Tarek Ajami Fardoun	University of Navarra	LL/AL	USA Health Urology	SP
5. Huma Akta	Dow Medical College	LL/AL	USA Health IM	R
6. Ahmed H Al Sharie	Jordan University	LL/AL	Southeast Health IM	R
7. Nourallah Alsayed	Tishreen University	LL/AL	Flowers Hospital IM	R
8. Batool Baker Alzghoul	Hashemite Univ Faculty of Medicine	LL/AL	Cahaba Medical Care FM	R
9. Rasheeq Amin	Alabama College of Osteo Medicine	LL/AL	USA Health Psychiatry	R
10. Angela Marie Anim	Autonomous University	LL/AL	Gadsden Regional FM	R
11. Alexander Brian Aratani	Midwestern University	LL/AL	Southeast Health Trans Year	R
12. Breonna Carnae Arvie	LSU Shreveport	LL/AL	Cahaba Medical FM	R
13. Akanksha Atulkar	Shyam Shah Medical College	LL/AL	Mobile Infirmary IM	R
14. Shelby Elaine Austin	Edward Via College of Osteo Med	LL/AL	USA Health IM/Pediatrics	R
15. Sidney Irvin Bailey	University of South Alabama	LL/AL	USA Health IM	R
16. Hajelkhidir Adil Bala	University of Gezira	LL/AL	Southeast Health IM	R
17. Brandon Michael Barnes	University of South Alabama	LL/AL	USA Health Surgery	R
18. Bahaa N Bayer Batayneh	University of Jordan	LL/AL	Southeast Health IM	R
19. Garet Allen Beyer	Alabama College of Osteo Medicine	LL/AL	Mobile Infirmary IM	R
20. Chasen Aric Birdsong	Lincoln Memorial	LL/AL	USA Health Emergency Med	R
21. Hanna V Bobinger	University of South Alabama	LL/AL	USA Health IM	R
22. Jacob Westin Bolling	Edward Via College of Osteo Med	LL/AL	USA Health IM	R
23. Sydney Milbre Brice	Edward Via College of Osteo Med	LL/AL	Cahaba FM	R
24. William Eric Broadfoot	University of South Alabama	LL/AL	USA Health IM	R
25. Adeniyi Kayode Busari	Obafemi Awolowo University	LL/AL	Cahaba FM	R
26. Austin G Chapman	University of South Alabama	LL/AL	USA Health Surgery	R
27. Matthew T Collins	Lincoln Memorial	LL/AL	USA Health Surgery	R
28. Erica Irene Conway	University of South Alabama	LL/AL	USA Health IM	R
29. Taylor Sadee Cromwell	American University of Antigua	LL/AL	UA Tuscaloosa FM	R

	<u>Name</u>	<u>Medical School</u>	<u>End.</u>	<u>Location</u>	<u>License</u>
30.	Stephen Thomas Curry	St. Georges University of Medicine	LL/AL	USA Health Emergency Med	R
31.	Michelle Kristine Custer	Edward Via College of Osteo Med	LL/AL	Southeast Health Trans Year	R
32.	William Curtis Davis	University of Alabama	LL/AL	USA Health Emergency Med	R
33.	Kristin Ann Delgado	LSU Shreveport	LL/AL	USA Health Surgery	R
34.	Abigail Fabbri Farrar	Kansas City University	LL/AL	USA Health FM	R
35.	Andrew Arthur Farrar	Kansas City University	LL/AL	USA Health IM	R
36.	Ashley Fernandez	University of Cincinnati	LL/AL	USA Health OBGYN	R
37.	Victoria Christine Fonzi	Emory University	LL/AL	Cahaba FM	R
38.	Nicholas S Friend	University of South Alabama	LL/AL	USA Health IM	R
39.	Mary Friend	University of South Alabama	LL/AL	USA Health Surgery	R
40.	Steven Samuel Gaffin	University of Alabama Birmingham	LL/AL	Cahaba FM	R
41.	Marcela Garzon-Olave	University of the Andes	LL/AL	Southeast Health Trans Year	R
42.	Jewell George	Ross University	LL/AL	Southeast Health IM	R
43.	Srushti N Ghetiya	GMERS Medical College, Junagadh	LL/AL	Southeast Health IM	R
44.	Jake Tyler Godwin	Alabama College of Osteo Medicine	LL/AL	Southeast Health Trans Year	R
45.	Hannah M Goymer	University of Alabama Birmingham	LL/AL	Cahaba FM	R
46.	Thomas Stewart Gwin	University of Alabama Birmingham	LL/AL	Cahaba FM	R
47.	Jonah Blake Harrington	Louisiana State University	LL/AL	USA Health Psychiatry	R
48.	Grant Gregory Harris	Alabama College of Osteo Medicine	LL/AL	USA Health Emergency Med	R
49.	Allison Grace Harvey	Edward Via College of Osteo Med	LL/AL	Cahaba FM	R
50.	Katelyn Nicole Harwell	University of South Alabama	LL/AL	USA Health IM	R
51.	Elisabeth P Holbert	University of Alabama Birmingham	LL/AL	Cahaba FM	R
52.	Saw Paul Wai Htoo	University of Medicine, Yangon	LL/AL	Cahaba FM	R
53.	Raja G Dastgir Hussain	Ross University	LL/AL	Cahaba Psychiatry	R
54.	Zain Saadat Hussain	University of Med & Health Sciences	LL/AL	Southeast Health Trans Year	R
55.	Syeda Hooria Imtiaz	Dow Medical College	LL/AL	Southeast Health IM	R
56.	Sarah Hunter Jackson	University of South Alabama	LL/AL	USA Health Peds	R
57.	Hira Javaid	University of Health Sciences, Lahore	LL/AL	Southeast Health IM	R
58.	Katrina Jiayu Jiang	University of Queensland	LL/AL	USA Health Pathology	R
59.	Hunter H Johnson	University of Alabama Birmingham	LL/AL	Cahaba FM	R
60.	Anudeep Kandel	B.P. Koirala Institute of Health Sci	LL/AL	Flowers Hospital IM	R
61.	Gaurab KC	Kathmandu Medical College	LL/AL	Southeast Health IM	R
62.	Numair Hashim Khan	Rocky Vista University	LL/AL	USA Health IM	R
63.	Nithya Krishnakumaran	Kerala University	LL/AL	Southeast Health Trans Year	R
64.	Grant Wayne Lambert	LSU HSC School of Med New Orleans	LL/AL	USA Health Ortho Surgery	R
65.	Warren Edward Law III	University of South Alabama	LL/AL	USA Health IM	R
66.	Ryan G Liengswangwong	Alabama College of Osteo Medicine	LL/AL	Southeast Health Trans Year	R
67.	Haider Malik	Shifa College of Medicine	LL/AL	Southeast Health IM	R
68.	Anastasiia Merkulova	Orenburg State Medical University	LL/AL	Southeast Health IM	R
69.	Andrew Wilson Mitchell	University of Alabama Birmingham	LL/AL	USA Health Surgery	R
70.	Djuliana G Mladenova	Medical University Varna	LL/AL	Southeast Health Trans Year	R
71.	Anthony Robert Monaco	Alabama College of Osteo Medicine	LL/AL	Southeast Health Trans Year	R
72.	Abygale E Nelson	University of Alabama Birmingham	LL/AL	Cahaba FM	R
73.	Megan Elizabeth Nelson	Pacific Northwest U of Health Sci	LL/AL	Mobile Infirmary IM	R
74.	Eric Cuong Nguyen	University of South Alabama	LL/AL	USA Health IM	R
75.	Wesnord Norze	Faculty of Medicine and Pharmacy	LL/AL	Mobile Infirmary IM	R

	<u>Name</u>	<u>Medical School</u>	<u>End.</u>	<u>Location</u>	<u>License</u>
76.	Kara Anne M O'Connor	Edward Via College of Osteo Med	LL/AL	USA Health OBGYN	R
77.	Jennifer Adaugo Okpara	Windsor University	LL/AL	Cahaba FM	R
78.	Erdi Ozdemir	Hacettepe University	LL/AL	UAB Ortho Surgery	F
79.	Victoria Boyd Pearman	Alabama College of Osteo Medicine	LL/AL	USA Health IM	R
80.	Ryan Lee Pearman	Alabama College of Osteo Medicine	LL/AL	USA Health: IM	R
81.	Sonia Kristina Portillo	Medical University of the Americas	LL/AL	Southeast Health IM	R
82.	Ananya Prakash	Vydehi Institute of Medical Sciences	LL/AL	Southeast Health IM	R
83.	Mohammed A Rahman	Enam Medical College and Hospital	LL/AL	USA Health Peds	R
84.	Vikram Iengar Ram	Kasturba Medical College, Manipal	LL/AL	Southeast Health Trans Year	R
85.	Franchesca Ramirez Castillo	St. Georges U of Medicine, Grenada	LL/AL	Southeast Health IM	R
86.	Sandesh Raut	Kathmandu Medical College	LL/AL	Flowers Hospital IM	R
87.	Somaye Rezaei	Shahid Beheshti U of Medical Sci	LL/AL	Southeast Health Trans Year	R
88.	Aiman Saeed	Khyber Med College, U of Peshawar	LL/AL	Mobile Infirmary IM	R
89.	Enaja Venkata Sambatur	SRI Devaraj URS Academy Higher Ed	LL/AL	Southeast Health Trans Year	R
90.	Dylan Scott Schindele	Edward Via College of Osteo Med	LL/AL	USA Health FM	R
91.	Regan Elizabeth Shaw	University of South Alabama	LL/AL	USA Health OBGYN	R
92.	Katie Lee Shearer	UT Health Science Center	LL/AL	USA Health Surgery	R
93.	Dale E Shepherd, II	Baylor College of Medicine	LL/AL	USA Health Psychiatry	R
94.	Jeremy Wayne Shiver	Edward Via College of Osteo Med	LL/AL	USA Health IM	R
95.	Mark Elliott Slusher	Univ of South Carolina School of Med	LL/AL	USA Health Emergency Med	R
96.	Brooklyn Richard Spears	LSU Health Sci Center Shreveport	LL/AL	USA Health OBGYN	R
97.	Emily Marie Stone	St. George's U Sch of Med, Grenada	LL/AL	UA FM	R
98.	Emily Laelle Stringfellow	F P Whiddon College (USA Health)	LL/AL	USA Health IM	R
99.	Emily Diem Tran	Philadelphia College of Osteo Med	LL/AL	Cahaba FM	R
100.	Ada C Van der Zijp-Tan	University of South Alabama	LL/AL	USA Health FM	R
101.	Whitney A Vaughan	Alabama College of Osteo Medicine	LL/AL	USA Health Emergency Med	R
102.	Matthew C Watterson	University of South Alabama	LL/AL	USA Health Ortho Surgery	R
103.	Alexandra D Wilson	St. George's U Sch of Med, Grenada	LL/AL	UAB Pathology	R
104.	Delaney Corinne Yu	Edward Via College of Osteo Med	LL/AL	USA Health Pathology	R
105.	Samina Zahid	Khyber Girls Medical College	LL/AL	Cahaba UAB FM	R

A motion was made by Commissioner Aldridge with a second by Commissioner Morris to approve applicant numbers one through one hundred and five (1-105) for limited licensure. The motion was approved by unanimous vote.

Provisional License Applicants

	<u>Name</u>	<u>Medical School</u>	<u>Endorsement</u>
1.	Sophia Cecile Bertot	Indiana University	USMLE
2.	Lee Pennington Bowman	University of Florida	USMLE
3.	Kaylie Alexandra Catlin	University of Alabama School of Medicine Birmingham	USMLE
4.	Connor Blake Christensen	University of Miami Miller School of Medicine	USMLE
5.	Elissa Corsino	Meharry Medical College School of Medicine	USMLE

<u>Name</u>	<u>Medical School</u>	<u>Endorsement</u>
6. Holton Deatherage	University of Alabama School of Medicine Birmingham	USMLE
7. Justin Michael Eichinger	University of Louisville School of Medicine	USMLE
8. Ayman Ahmad Ghattas	Saint James School of Medicine	USMLE
9. Nicole Frances Grigoryants	Alabama College of Osteopathic Medicine	COMLEX
10. Wesley Holland	Yale University	USMLE
11. Zachary Thomas Jasper	University of South Carolina	USMLE
12. Alexandra Parks King	University of Louisville School of Medicine	USMLE
13. Jeremy Kuder	Florida State University	USMLE
14. Jacelyn Emily Peabody Lever	University of Alabama School of Medicine Birmingham	USMLE
15. Callie Faye O'Bryant	Augusta University	USMLE
16. Christopher Jerald Ott	Lincoln Memorial University Debusk College of Osteopathic Med	COMLEX
17. Timorthy Storm Owens	University of Tennessee Memphis College of Medicine	USMLE
18. Tulsi K Patel	Lake Erie College of Osteopathic Medicine	COMLEX
19. Tyler Christian Power	University of Alabama School of Medicine Birmingham	USMLE
20. Yumna Riyaz	Ross University	USMLE
21. Charles Owen Ross	University of Alabama School of Medicine Birmingham	USMLE
22. Omar Ahmed Sohail	University of Michigan Medical School	USMLE
23. Brittany Roman Upp	University of Alabama School of Medicine Birmingham	USMLE
24. Andrew David Washington	University of South Alabama	USMLE
25. Carly Rae White	University of Louisville School of Medicine	USMLE

A motion was made by Commissioner Aldridge with a second by Commissioner Morris to approve applicant numbers one through twenty-five (1-25) for provisional licensure. The motion was approved by unanimous vote.

IMLCC Report

The Commission received as information a report of the licenses that were issued via the Interstate Medical Licensure Compact from May 1, 2025, through May 31, 2025. A copy of this report is attached as Exhibit "A".

REPORTS

Physician Monitoring Report

The Commission received as information the physician monitoring report dated June 18, 2025. A copy of the report is attached as Exhibit "B".

APPLICANTS FOR REVIEW

Christina Riojas, M.D.

A motion was made by Commissioner Christopher with a second by Commissioner Morris to approve Dr. Riojas' application for full licensure. The motion was approved by unanimous vote.

DISCUSSION ITEMS

James C. Dilday, M.D.

The Commission received as information an update from Aaron Dettling, General Counsel, regarding the Amended Complaint filed by James C. Dilday, M.D., in the Circuit Court of Montgomery County.

Rules for Adoption: 545-X-1-.02

The Commission noted that no public comments were received in response to the public notice of proposed revisions to Rule 545-X-1-.02 published in the April 30, 2025 Alabama Administrative Monthly. A motion was made by Commissioner Christopher with a second by Commissioner Nelson-Garrett to adopt the Rule Revision to the Administrative Rule 545-X-1-.02. A copy of the rule is attached as Exhibit "C".

Advisory Council on Additional Licensing Models – Draft Guidance

Draft guidance from the Federation of State Medical Boards, Intealth, and the ACGME's Advisory Council on Additional Licensing Models was received as information. A copy of the draft is attached as Exhibit "D".

Rule for Publication 540-X-27-.04 Application for Bridge Year Graduate Physician Permit

The Commission received as information the Rule for Publication: Admin Rule 540-X-27-.04 Application for Bridge Year Graduate Physician Permit. A copy of the rule is attached hereto as Exhibit "E".

Election of Officers

A motion was made by Commissioner Christopher to nominate Commissioner Alsip as Chairman of the Medical Licensure Commission for the 2025-2026 term. A second was made by Commissioner Varner. A vote was taken, and Commissioner Alsip was elected Chairman of the Commission by unanimous vote effective immediately following the conclusion of the June 25, 2025 meeting.

A motion was made by Commissioner Christopher to nominate Commissioner Aldridge as Vice Chairman of the Medical Licensure Commission for the 2025-2026 term. A second was made by Commissioner Varner. A vote was taken, and Commissioner Aldridge was elected Vice

Chairman of the Commission by unanimous vote effective immediately following the conclusion of the June 25, 2025 meeting.

REQUESTS

Wendy Walker, M.D.

The Commission considered a request filed by Dr. Walker to remove the 2012 report filed with the National Practitioner Data Bank. A motion was made by Commissioner Christopher with a second by Commissioner Varner to amend Dr. Walker's Consent Decree of April 18, 2012 so as to remove the reprimand. The motion was approved by unanimous vote. A copy of the Commission's order is attached hereto as Exhibit "F".

ADMINISTRATIVE FILINGS

Gregory Keith Parker, M.D.

The Commission received an Administrative Complaint and Petition for Summary Suspension filed by the Alabama State Board of Medical Examiners. A motion was made by Commissioner Aldridge with a second by Commissioner Christopher to enter an order summarily suspending Dr. Parker's license to practice medicine in Alabama and setting a hearing for September 25, 2025. The motion was approved by unanimous vote. A copy of the Commission's order is attached hereto as Exhibit "G".

CLOSED SESSION UNDER ALA. CODE 34-24-361.1

At 9:40 a.m., the Commission entered closed session pursuant to Alabama Code § 34-24-361.1 to hear and consider the following matters:

Brian E. Richardson, M.D.

The Commission received a Motion to Compel and a Motion to Stay filed on behalf of Dr. Richardson. A motion was made by Commissioner Christopher with a second by Commissioner Falgout to deny both motions. The motion was approved by unanimous vote. A copy of the Commission's order is attached hereto as Exhibit "H".

Austin Broussard, M.D.

At the conclusion of this interview, a motion was made by Commissioner Falgout with a second by Commissioner Christopher to approve Dr. Broussard's application for full licensure. The motion was approved by unanimous vote.

Craig R. Jones, D.O.


The Commission received a Motion to Continue Hearing regarding the Administrative Complaint filed by the Alabama State Board of Medical Examiners. A motion was made by Commissioner Nelson-Garrett with a second by Commissioner Morris to ratify the Chairman's decision to continue hearing and enter an order resetting the hearing for August 27, 2025. The motion was approved by unanimous vote. A copy of the Commission's order is attached hereto as Exhibit "I".

Meeting adjourned at 10:52 a.m.

PUBLIC MEETING NOTICE: The next meeting of the Alabama Medical Licensure Commission was announced for Wednesday, July 23, 2025, beginning at 9:00 a.m.



JORGE ALSOP, M.D., Chairman
Alabama Medical Licensure Commission



Rebecca Robbins, Director of Operations
Recording Secretary
Alabama Medical Licensure Commission



Date Signed

EXHIBIT

A

IMLCC Licenses Issued May 1, 2025 - May 31, 2025 (257)

Name	License Type	License Number	Status	Issue Date	Expiration Date	State of Primary Licensure
Brian Tracy Evans	MD	51403	Active	5/27/2025	12/31/2025	Arizona
Ben Eugene Paxton	MD	51314	Active	5/12/2025	12/31/2025	Arizona
Geny Ann Augustine	MD	51228	Active	5/9/2025	12/31/2025	Arizona
Amarpreet Singh Bhowra	MD	51251	Active	5/9/2025	12/31/2025	Arizona
Ogochukwu Amarachi Imo	MD	51402	Active	5/27/2025	12/31/2025	Colorado
Harold Giles Richardson	MD	51389	Active	5/21/2025	12/31/2025	Colorado
Kristen Kelly Wolfe	MD	51364	Active	5/16/2025	12/31/2025	Colorado
Jatinder Singh Aulakh	MD	51247	Active	5/9/2025	12/31/2025	Colorado
James Michael Kelley	MD	51286	Active	5/9/2025	12/31/2025	Colorado
Clinton Malone	MD	51199	Active	5/8/2025	12/31/2025	Colorado
Stacey Pilkington	DO	4134	Active	5/9/2025	12/31/2025	Colorado
Melissa Elrich	MD	51411	Active	5/29/2025	12/31/2025	Florida
Jorge Carriazo Isasi	MD	51404	Active	5/27/2025	12/31/2025	Florida
Diego Lugo Baruqui	MD	51401	Active	5/27/2025	12/31/2025	Florida
Rajesh Mali	MD	51397	Active	5/23/2025	12/31/2025	Florida
Mariali Alvarez-Rohena	MD	51392	Active	5/22/2025	12/31/2025	Florida
Mary Simmons Burgess	MD	51386	Active	5/21/2025	12/31/2025	Florida
Amitabh Kumar	MD	51390	Active	5/21/2025	12/31/2025	Florida
Tanuja Malempati Kotak	MD	51380	Active	5/20/2025	12/31/2025	Florida
Saira Hussain	MD	51371	Active	5/19/2025	12/31/2025	Florida
Richard Freier II	MD	51355	Active	5/15/2025	12/31/2025	Florida
Lloyd Duncan Heilman	MD	51353	Active	5/15/2025	12/31/2025	Florida
Andres Santayana	MD	51351	Active	5/15/2025	12/31/2025	Florida
John Joseph Yannucci II	MD	51344	Active	5/15/2025	12/31/2025	Florida
Ahlan Mohamed Jama	MD	51336	Active	5/14/2025	12/31/2025	Florida
Martin Strassnig	MD	51329	Active	5/14/2025	12/31/2025	Florida
Vijay Sai Veerapaneni	MD	51321	Active	5/13/2025	12/31/2025	Florida
Jordan Nicholle Dever	MD	51316	Active	5/12/2025	12/31/2025	Florida
Nasima Gowani	MD	51312	Active	5/12/2025	12/31/2025	Florida
Sunil Kumar Gujrathi	MD	51318	Active	5/12/2025	12/31/2025	Florida
Roy Michael Kaplan	MD	51306	Active	5/12/2025	12/31/2025	Florida
Amy Sue Kelley	MD	51310	Active	5/12/2025	12/31/2025	Florida
Ryan Watson	MD	51320	Active	5/12/2025	12/31/2025	Florida
Sarah Crane Adams	MD	51272	Active	5/9/2025	12/31/2025	Florida
Charml Balsara	MD	51280	Active	5/9/2025	12/31/2025	Florida

Michael Lee Carr	MD	51254	Active	5/9/2025	12/31/2025	Florida
Zoran Drmanovic	MD	51303	Active	5/9/2025	12/31/2025	Florida
Juan Cesar Fernandez Castillo	MD	51257	Active	5/9/2025	12/31/2025	Florida
Alessandra Giannini Ferrera	MD	51218	Active	5/9/2025	12/31/2025	Florida
Youssef Sahwki Hassan	MD	51268	Active	5/9/2025	12/31/2025	Florida
Mohammad Yassin Hmaeh	MD	51233	Active	5/9/2025	12/31/2025	Florida
Tara Larkin	MD	51210	Active	5/9/2025	12/31/2025	Florida
Marni Lynn Nicholas	MD	51220	Active	5/9/2025	12/31/2025	Florida
Reeba Prince	MD	51223	Active	5/9/2025	12/31/2025	Florida
Sarah Charity Pursley	MD	51294	Active	5/9/2025	12/31/2025	Florida
Dorothy Marquita Russ	MD	51293	Active	5/9/2025	12/31/2025	Florida
Joseph Gabriel Thomas	MD	51236	Active	5/9/2025	12/31/2025	Florida
David Charles Whitehead	MD	51232	Active	5/9/2025	12/31/2025	Florida
Khalil Mohammad Afsh	MD	51196	Active	5/8/2025	12/31/2025	Florida
Muthuraman Alagappan	MD	51173	Active	5/8/2025	12/31/2025	Florida
Rishi Khakhkar	MD	51172	Active	5/8/2025	12/31/2025	Florida
Kenechukwu Okeke	MD	51185	Active	5/8/2025	12/31/2025	Florida
Emmanuel Noel Cruz Tancinco	MD	51184	Active	5/8/2025	12/31/2025	Florida
James Edward Binkard	DO	4167	Active	5/27/2025	12/31/2025	Florida
Alexandra Bernal Pierrot	DO	4166	Active	5/27/2025	12/31/2025	Florida
Divya Abhijiti Pandya	DO	4163	Active	5/20/2025	12/31/2025	Florida
Samuel Lucas Mota-Martinez	DO	4162	Active	5/15/2025	12/31/2025	Florida
Russell Ray Shipman	DO	4159	Active	5/15/2025	12/31/2025	Florida
Giovana Rene Crooks	DO	4157	Active	5/13/2025	12/31/2025	Florida
Tasneem Bhatia	MD	51436	Active	5/30/2025	12/31/2025	Georgia
Joseph Robert Griggs	MD	51444	Active	5/30/2025	12/31/2025	Georgia
Khadijatou Leila Njimoluh	MD	51396	Active	5/23/2025	12/31/2025	Georgia
David D. Durden	MD	51393	Active	5/22/2025	12/31/2025	Georgia
Arvind Chaakravarthy	MD	51360	Active	5/16/2025	12/31/2025	Georgia
Sean Michael Lowe	MD	51365	Active	5/16/2025	12/31/2025	Georgia
Bindiya Gandhi	MD	51333	Active	5/14/2025	12/31/2025	Georgia
Loghman Huseynov	MD	51334	Active	5/14/2025	12/31/2025	Georgia
Michael Bret Anderson	MD	51326	Active	5/13/2025	12/31/2025	Georgia
Tracy Wimbush	MD	51327	Active	5/13/2025	12/31/2025	Georgia
Reem Ahmed	MD	51317	Active	5/12/2025	12/31/2025	Georgia
Steven Michael Hines	MD	51313	Active	5/12/2025	12/31/2025	Georgia
Macy Alexandria McNair	MD	51305	Active	5/12/2025	12/31/2025	Georgia
Derrick Nii Armaa Ashong	MD	51264	Active	5/9/2025	12/31/2025	Georgia

Edward Christian Cameron	MD	51295	Active	5/9/2025	12/31/2025	Georgia
Patricia Coquillon	MD	51226	Active	5/9/2025	12/31/2025	Georgia
Benjamin Elias Garcia	MD	51298	Active	5/9/2025	12/31/2025	Georgia
Robin Michele Johnson	MD	51275	Active	5/9/2025	12/31/2025	Georgia
Song-Chu Ko	MD	51250	Active	5/9/2025	12/31/2025	Georgia
Stanford Plavin	MD	51271	Active	5/9/2025	12/31/2025	Georgia
Nagamalar Raju	MD	51217	Active	5/9/2025	12/31/2025	Georgia
Sharon Elizabeth Carswell	MD	51373	Active	5/19/2025	12/31/2025	Idaho
Jack Marek Klem	MD	51154	Active	5/2/2025	12/31/2025	Idaho
Shelly Ann Mann	MD	51435	Active	5/29/2025	12/31/2025	Illinois
Jennifer Kruse Allen	MD	51385	Active	5/21/2025	12/31/2025	Illinois
Brandi Monique Jackson	MD	51342	Active	5/15/2025	12/31/2025	Illinois
Aishah Yanssaneh	MD	51322	Active	5/13/2025	12/31/2025	Illinois
Alex Hyeongseog You	MD	51308	Active	5/12/2025	12/31/2025	Illinois
Holly Erin Dallas	MD	51235	Active	5/9/2025	12/31/2025	Illinois
Soujanya Rao Pulluru	MD	51245	Active	5/9/2025	12/31/2025	Illinois
Sonal Singh	MD	51216	Active	5/9/2025	12/31/2025	Illinois
Anupam Verma	MD	51276	Active	5/9/2025	12/31/2025	Illinois
Hugh McSwain	MD	51176	Active	5/8/2025	12/31/2025	Illinois
Armen Sarkis Aivazi	MD	51240	Active	5/9/2025	12/31/2025	Indiana
Clifford William Fetters	MD	51248	Active	5/9/2025	12/31/2025	Indiana
Grettel Trajano Tesado	MD	51258	Active	5/9/2025	12/31/2025	Indiana
Brenda Vazquez	MD	51243	Active	5/9/2025	12/31/2025	Indiana
Joseph Blitman	MD	51323	Active	5/13/2025	12/31/2025	Iowa
Haroon Rashid Afridi	MD	51302	Active	5/9/2025	12/31/2025	Iowa
Loren Garret Longenecker	MD	51244	Active	5/9/2025	12/31/2025	Iowa
Timothy Joseph Rupp	MD	51198	Active	5/8/2025	12/31/2025	Iowa
Sean David Stanga	MD	51171	Active	5/8/2025	12/31/2025	Iowa
Isaac Jordan Hinton	DO	4138	Active	5/9/2025	12/31/2025	Iowa
Melissa Ann Ehm Pote	DO	4130	Active	5/8/2025	12/31/2025	Iowa
Chad Michael Ruble	MD	51391	Active	5/22/2025	12/31/2025	Kansas
Sarah Therese Moran	DO	4139	Active	5/9/2025	12/31/2025	Kansas
Christopher Wade Larson	DO	4132	Active	5/8/2025	12/31/2025	Kansas
Travis Lutz	MD	51350	Active	5/15/2025	12/31/2025	Kentucky
Kelli Miller	MD	51347	Active	5/15/2025	12/31/2025	Kentucky
Fritz Gerald Charles	MD	51231	Active	5/9/2025	12/31/2025	Kentucky
Haider Shamsulddin	MD	51209	Active	5/9/2025	12/31/2025	Kentucky
Michael W Bryant	DO	4164	Active	5/22/2025	12/31/2025	Kentucky

Leticia Alves Antunes	MD	51407	Active	5/27/2025	12/31/2025	Louisiana
Charla Nicole Poole	MD	51398	Active	5/23/2025	12/31/2025	Louisiana
Kelsha Harvey	MD	51339	Active	5/14/2025	12/31/2025	Louisiana
Dietric L Hennings	MD	51331	Active	5/14/2025	12/31/2025	Louisiana
Ijeoma Nneka Innocent-Ituah	MD	51332	Active	5/14/2025	12/31/2025	Louisiana
Gregg Maurice Barre	MD	51307	Active	5/12/2025	12/31/2025	Louisiana
Dennis Kay	MD	51315	Active	5/12/2025	12/31/2025	Louisiana
Ronald Lewis	MD	51311	Active	5/12/2025	12/31/2025	Louisiana
Lawrence Counts	MD	51261	Active	5/9/2025	12/31/2025	Louisiana
Andrew David Oncale	MD	51253	Active	5/9/2025	12/31/2025	Louisiana
Gregory Toblin	MD	51259	Active	5/9/2025	12/31/2025	Louisiana
Cynthia Zeh	MD	51288	Active	5/9/2025	12/31/2025	Louisiana
Charles Paul Burnell	MD	51188	Active	5/8/2025	12/31/2025	Louisiana
Nicole Ulrich	MD	51194	Active	5/8/2025	12/31/2025	Louisiana
Jessica Brannon Russell	MD	51408	Active	5/27/2025	12/31/2025	Maryland
Fikre Degefu	MD	51395	Active	5/22/2025	12/31/2025	Maryland
Fatmatta Kuyateh	MD	51345	Active	5/15/2025	12/31/2025	Maryland
Caitlin Anne Visek	MD	51354	Active	5/15/2025	12/31/2025	Maryland
Stacey Michelle Kallem	MD	51337	Active	5/14/2025	12/31/2025	Maryland
Debra Fertig	MD	51237	Active	5/9/2025	12/31/2025	Maryland
Allyson Marie Hilliard	MD	51297	Active	5/9/2025	12/31/2025	Maryland
Krupa Revanna Nataraji	MD	51285	Active	5/9/2025	12/31/2025	Maryland
Kathleen L Shaffer	MD	51277	Active	5/9/2025	12/31/2025	Maryland
Rameet Singh Sidhu	MD	51290	Active	5/9/2025	12/31/2025	Maryland
Eva Marie Luo	MD	51201	Active	5/8/2025	12/31/2025	Maryland
Natalie Kamal Sadik	MD	51405	Active	5/27/2025	12/31/2025	Michigan
Osinachi George Ajaero	MD	51283	Active	5/9/2025	12/31/2025	Michigan
Marina Bogdanovic	MD	51279	Active	5/9/2025	12/31/2025	Michigan
Sophia Array Lincoln	MD	51281	Active	5/9/2025	12/31/2025	Michigan
Ashley Makahiapoleikaumaka Ono	MD	51260	Active	5/9/2025	12/31/2025	Michigan
Jaimie Shannen Tom	MD	51255	Active	5/9/2025	12/31/2025	Michigan
Sangeeta Sharad Parulekar	DO	4165	Active	5/27/2025	12/31/2025	Michigan
Swarup Misra	DO	4160	Active	5/15/2025	12/31/2025	Michigan
Rebecca Jeanne Zadroga	MD	51400	Active	5/27/2025	12/31/2025	Minnesota
Michelle Tiwalade Green Hightower	MD	51292	Active	5/9/2025	12/31/2025	Minnesota
Robert Gerald Jacoby	MD	51234	Active	5/9/2025	12/31/2025	Minnesota
Kendall Drew Price	MD	51263	Active	5/9/2025	12/31/2025	Minnesota
Zaki Abou Zahr	MD	51187	Active	5/8/2025	12/31/2025	Minnesota

Joseph Matthew Shadpour	DO	4129	Active	5/8/2025	12/31/2025	Minnesota
Kevin J Batte	MD	51221	Active	5/9/2025	12/31/2025	Mississippi
Maria Paula Domino	MD	51262	Active	5/9/2025	12/31/2025	Mississippi
Arie Ceville Shaw	MD	51213	Active	5/9/2025	12/31/2025	Mississippi
Henry Hilton Dodd	MD	51153	Active	5/2/2025	12/31/2025	Mississippi
Mahmoud Halawa	MD	51412	Active	5/29/2025	12/31/2025	Missouri
Joseph Daniel Giardina	MD	51376	Active	5/19/2025	12/31/2025	Missouri
Jacquelyn Adele Bailey	MD	51224	Active	5/9/2025	12/31/2025	Missouri
Liam Gannon	MD	51246	Active	5/9/2025	12/31/2025	Missouri
William P Wright Jr.	MD	51273	Active	5/9/2025	12/31/2025	Missouri
Elizabeth Ryan Jaffe	MD	51370	Active	5/19/2025	12/31/2025	Montana
Juris Leon Purins	MD	51289	Active	5/9/2025	12/31/2025	Nebraska
Javier Alexander Rodriguez	MD	51388	Active	5/21/2025	12/31/2025	Nevada
Xiao Bi	MD	51379	Active	5/20/2025	12/31/2025	Nevada
Yeganeh Behnoud Miller	MD	51362	Active	5/16/2025	12/31/2025	Nevada
Janette Coelho Leal	MD	51269	Active	5/9/2025	12/31/2025	Nevada
Bailey Zhao	MD	51214	Active	5/9/2025	12/31/2025	Nevada
Alexander Chang	MD	51170	Active	5/8/2025	12/31/2025	Nevada
Nizar Salem	MD	51182	Active	5/8/2025	12/31/2025	Nevada
Kyle Christopher Rossi	MD	51299	Active	5/9/2025	12/31/2025	New Hampshire
ShaBarbara Elaine McDaniel	MD	51399	Active	5/23/2025	12/31/2025	New Jersey
Bryce C. Ratliff	MD	51387	Active	5/21/2025	12/31/2025	New Jersey
Thomas Joseph Lardner	MD	51377	Active	5/19/2025	12/31/2025	New Jersey
Branko Skovrlj	MD	51352	Active	5/15/2025	12/31/2025	New Jersey
Alex Francisco Lazo Vasquez	MD	51324	Active	5/13/2025	12/31/2025	New Jersey
David Joseph Adinaro	MD	51301	Active	5/9/2025	12/31/2025	New Jersey
Daniel J Rosen	MD	51291	Active	5/9/2025	12/31/2025	New Jersey
Sunil Saxena	MD	51219	Active	5/9/2025	12/31/2025	New Jersey
Thomas Steineke	MD	51249	Active	5/9/2025	12/31/2025	New Jersey
Andrew Charles Krakowski	MD	51179	Active	5/8/2025	12/31/2025	New Jersey
Samuel Comia Carino	DO	4161	Active	5/15/2025	12/31/2025	New Jersey
Abdelrahman Raed Abdelaziz	MD	51282	Active	5/9/2025	12/31/2025	Ohio
Niketa J Chheda	MD	51211	Active	5/9/2025	12/31/2025	Ohio
Forrest Foster	MD	51238	Active	5/9/2025	12/31/2025	Ohio
Bethany Leigh Harper	MD	51296	Active	5/9/2025	12/31/2025	Ohio
Ahmed Kardar	MD	51206	Active	5/9/2025	12/31/2025	Ohio
Kamshad Raiszadeh	MD	51227	Active	5/9/2025	12/31/2025	Ohio
Daniel Michael Sullivan	MD	51287	Active	5/9/2025	12/31/2025	Ohio

Ifeoma Aguanunu	MD	51202	Active	5/8/2025	12/31/2025	Ohio
Erik Daniel Johnson	MD	51181	Active	5/8/2025	12/31/2025	Ohio
Margaret Lee	MD	51195	Active	5/8/2025	12/31/2025	Ohio
Daniel Peters	MD	51197	Active	5/8/2025	12/31/2025	Ohio
Scott Douglass Prater	MD	51191	Active	5/8/2025	12/31/2025	Oklahoma
Renjit Allen Sundhara	MD	51439	Active	5/30/2025	12/31/2025	Tennessee
Jeffrey David Caughran	MD	51394	Active	5/22/2025	12/31/2025	Tennessee
Kashif Latif	MD	51383	Active	5/20/2025	12/31/2025	Tennessee
Jonathan Harvey Soslow	MD	51374	Active	5/19/2025	12/31/2025	Tennessee
Mohan S P Gounder	MD	51361	Active	5/16/2025	12/31/2025	Tennessee
Nathan Grant Lawrence	MD	51349	Active	5/15/2025	12/31/2025	Tennessee
Anjeli Song	MD	51346	Active	5/15/2025	12/31/2025	Tennessee
Cyree Collier	MD	51335	Active	5/14/2025	12/31/2025	Tennessee
Raj Bant	MD	51207	Active	5/9/2025	12/31/2025	Tennessee
Jesus Berdeja	MD	51212	Active	5/9/2025	12/31/2025	Tennessee
Matthew Renaud Bernhard	MD	51242	Active	5/9/2025	12/31/2025	Tennessee
Gift Egbon Eze	MD	51225	Active	5/9/2025	12/31/2025	Tennessee
Juan Jose Goyanes-Vasquez	MD	51222	Active	5/9/2025	12/31/2025	Tennessee
Jennifer Lynne Halpern	MD	51241	Active	5/9/2025	12/31/2025	Tennessee
Jake Hays McKay	MD	51274	Active	5/9/2025	12/31/2025	Tennessee
Emily Jane Gibson	MD	51189	Active	5/8/2025	12/31/2025	Tennessee
Carol Ann Linebarger	MD	51410	Active	5/29/2025	12/31/2025	Texas
Alan Simon Chiu	MD	51406	Active	5/27/2025	12/31/2025	Texas
Taylor Gordon Maloney	MD	51409	Active	5/27/2025	12/31/2025	Texas
George Oladipo Adesina	MD	51381	Active	5/20/2025	12/31/2025	Texas
Jamila Dayo Davison	MD	51366	Active	5/16/2025	12/31/2025	Texas
Kessy Joseph	MD	51367	Active	5/16/2025	12/31/2025	Texas
Ana Marie Mendez	MD	51358	Active	5/16/2025	12/31/2025	Texas
Tina Elizabeth Thomas	MD	51359	Active	5/16/2025	12/31/2025	Texas
John Edward Jones	MD	51348	Active	5/15/2025	12/31/2025	Texas
Vivek Sharma	MD	51343	Active	5/15/2025	12/31/2025	Texas
James Roger Sluss II	MD	51330	Active	5/14/2025	12/31/2025	Texas
Rajiv N Srinivasa	MD	51340	Active	5/14/2025	12/31/2025	Texas
Huy Dinh Tran	MD	51338	Active	5/14/2025	12/31/2025	Texas
Esohe Iyamu Osagiede	MD	51328	Active	5/13/2025	12/31/2025	Texas
Jai Jung	MD	51325	Active	5/13/2025	12/31/2025	Texas
Lisa Lynelle Gamble	MD	51309	Active	5/12/2025	12/31/2025	Texas
Shaun Philip Kaiser	MD	51319	Active	5/12/2025	12/31/2025	Texas

Ashley Marie Holloman	MD	51284	Active	5/9/2025	12/31/2025	Texas
Vasanthan Kuppuswamy	MD	51256	Active	5/9/2025	12/31/2025	Texas
Everaldo O'Sullivan Manning	MD	51239	Active	5/9/2025	12/31/2025	Texas
Oluchi Chinyere Oke	MD	51230	Active	5/9/2025	12/31/2025	Texas
Samer Srour	MD	51208	Active	5/9/2025	12/31/2025	Texas
Adrienne D'Anne Workman	MD	51278	Active	5/9/2025	12/31/2025	Texas
Elvira Andreyevna Allahverdieva	MD	51186	Active	5/8/2025	12/31/2025	Texas
Morgan Brooke Fletcher	MD	51200	Active	5/8/2025	12/31/2025	Texas
Avis Harden	MD	51180	Active	5/8/2025	12/31/2025	Texas
Surachit Kumar	MD	51177	Active	5/8/2025	12/31/2025	Texas
Courtney LeHew	MD	51174	Active	5/8/2025	12/31/2025	Texas
Alireza Nazeri	MD	51178	Active	5/8/2025	12/31/2025	Texas
Kia Miranda Ousley	MD	51193	Active	5/8/2025	12/31/2025	Texas
Parijatham S Thomas	MD	51175	Active	5/8/2025	12/31/2025	Texas
Jana Schade	DO	4173	Active	5/29/2025	12/31/2025	Texas
Ramana Gundlapa Surya	DO	4141	Active	5/9/2025	12/31/2025	Texas
Blair Franklin McGirk	MD	51192	Active	5/8/2025	12/31/2025	Utah
Samuel Crandall Thomas	MD	51190	Active	5/8/2025	12/31/2025	Utah
Quratul Ann Cheema	MD	51384	Active	5/20/2025	12/31/2025	Washington
Aparna Radhakisan Baheti	MD	51375	Active	5/19/2025	12/31/2025	Washington
Sue Xuan Poon	MD	51372	Active	5/19/2025	12/31/2025	Washington
Lon Alan Hayne	MD	51363	Active	5/16/2025	12/31/2025	Washington
Michael Chen	MD	51266	Active	5/9/2025	12/31/2025	Washington
Elias Aurelio Giraldo	MD	51265	Active	5/9/2025	12/31/2025	Washington
Huma Halder	MD	51267	Active	5/9/2025	12/31/2025	Washington
Gurjeet Singh	MD	51215	Active	5/9/2025	12/31/2025	Washington
Abraham Joseph Walusimbi	MD	51229	Active	5/9/2025	12/31/2025	Washington
Shammal Rockove	MD	51183	Active	5/8/2025	12/31/2025	Washington
Neil Tabakin	MD	51357	Active	5/16/2025	12/31/2025	Wisconsin
Alexis Rose Goss	MD	51252	Active	5/9/2025	12/31/2025	Wisconsin
Timothy Patrick Ripple	MD	51300	Active	5/9/2025	12/31/2025	Wisconsin
Jacques C Tham	MD	51270	Active	5/9/2025	12/31/2025	Wisconsin

**Total licenses issued April 2017 - 5,753*



EXHIBIT

B

STATE of ALABAMA
MEDICAL LICENSURE COMMISSION

To: Medical Licensure Commission
From: Nicole Roque
Subject: June Physician Monitoring Report
Date: 6/18/2025

The physicians listed below are currently being monitored by the MLC.

Physician: Robert Bolling, M.D.
Order Type: MLC
Due Date: Other
Order Date: 12/18/2024
License Status: Active-Probation
Requirements: Worksite Monitor Report
Received: Report from Luis Pernia, M.D.

Physician: Shakir Raza Meghani, M.D.
Order Type: BME/MLC
Due Date: Monthly
Order Date: 11/20/2023
License Status: Active
Requirements: Check PDMP Monthly
Received: PDMP Compliant



EXHIBIT

C

STATE of ALABAMA
MEDICAL LICENSURE COMMISSION

MEMORANDUM

To: Medical Licensure Commission
From: Rebecca Robbins
Date: June 23, 2025
Subject: Rule Revision to Administrative Rule 545-X-1-.02 – Public Comments

Attached is the filed rule revision to Administrative Rule 545-X-1-.02, revising that the chairmanship be limited to no more than five consecutive terms. The rule revision was submitted to the Legislative Services Agency for public comment on April 9, 2025 with a deadline to submit comments by June 4, 2025. The Medical Licensure Commission received no public comments.

Recommendation: Approve the language for adoption.

APA-1

TRANSMITTAL SHEET FOR NOTICE
OF INTENDED ACTION

Control: 545

Department or Agency: Medical Licensure Commission of Alabama

Rule No.: 545-X-1-.02

Rule Title: Officers Of The Commission

Intended Action Amend

Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety? No

Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare? Yes

Is there another, less restrictive method of regulation available that could adequately protect the public? No

Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved? No

To what degree?: N/A

Is the increase in cost more harmful to the public than the harm that might result from the absence of the proposed rule? NA

Are all facets of the rule-making process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public? Yes

Does the proposed action relate to or affect in any manner any litigation which the agency is a party to concerning the subject matter of the proposed rule? No

.....

Does the proposed rule have an economic impact? No

If the proposed rule has an economic impact, the proposed rule is required to be accompanied by a fiscal note prepared in accordance with subsection (f) of Section 41-22-23, Code of Alabama 1975.

.....

Certification of Authorized Official

I certify that the attached proposed rule has been proposed in full compliance with the requirements of Chapter 22, Title 41, Code of Alabama 1975, and that it conforms to all applicable filing requirements of the Administrative Procedure Division of the Legislative Services Agency.

Signature of certifying officer

Rebecca Robbins
Rebecca S Robbins

Date

Wednesday, April 9, 2025

REC'D & FILED
APR 9, 2025

LEGISLATIVE SVC AGENCY

APA-2

MEDICAL LICENSURE COMMISSION OF ALABAMA

NOTICE OF INTENDED ACTION

AGENCY NAME: Medical Licensure Commission of Alabama

RULE NO. & TITLE: 545-X-1-.02 Officers Of The Commission

INTENDED ACTION: Amend

SUBSTANCE OF PROPOSED ACTION:

The Medical Licensure Commission proposes a rule amendment to implement a set schedule to hold officer elections in June of each calendar year and impose a rule that no person shall be elected as chairman for more than five consecutive terms.

TIME, PLACE AND MANNER OF PRESENTING VIEWS:

All interested persons may submit data, views, or arguments concerning the proposed rule in writing to: Rebecca Robbins, Director of Commission Operations, Medical Licensure Commission of Alabama, 848 Washington Avenue, Montgomery, Alabama 36104, by mail or in person between the hours of 9:00 a.m. and 5 p.m. Monday through Friday, until and including June 4, 2025. Copies of proposed rules may be obtained at the Board's web site, www.albme.gov.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:

Wednesday, June 4, 2025

CONTACT PERSON AT AGENCY:

Rebecca Robbins, Director of
Operations
848 Washington Avenue
Montgomery, AL 36104
334-604-4953

Rebecca Robbins

Rebecca S Robbins

(Signature of officer authorized
to promulgate and adopt
rules or his or her deputy)

Officers Of The Commission.

(1) The Commission shall elect from its members a chairman and a vice chairman. The election of officers shall be held annually at the regular monthly meeting of the Commission held in June of each year. The officers so elected shall take office immediately upon adjournment of the meeting at which they are elected. No person shall be elected as chairman for more than five consecutive terms.

(2) The duties of the officers shall be as follows:

(a) The chairman shall preside at meetings of the Commission and appoint members to serve on such committees as may be created.

(b) The vice chairman shall preside in the absence of the chairman and shall assume the duties of the chairman when necessary.

(c) The chairman shall have the authority to take such action in the absence of the Commission that is necessary for the continuance of the day-to-day operation of the Commission and its staff. Such acts shall include scheduling of hearings, rulings on motions, requests and objections as they may relate to the admission or non-admission of evidence or testimony at hearings, and making determinations as to the order of evidence to be taken at hearings.

(d) The chairman shall preside over the meetings and hearings of the Commission and, with the aid of counsel, shall rule on procedural and evidentiary issues which may arise during the course of hearings. The chairman may delegate such portions of said responsibility as he may deem fit.

Author: Wayne P. Turner, Wallace D. Mills

Statutory Authority: Code of Ala. 1975, §34-24-311.

History: Filed May 6, 1983. **Amended:** Filed December 10, 2018; effective January 24, 2019. **Amended:** Published _____; effective _____.

EXHIBIT**D****Advisory Commission on Additional Licensing Models
DRAFT GUIDANCE DOCUMENT****Introduction**

The Advisory Commission on Additional Licensing Models was established in December 2023 to guide and advise state medical boards, state legislators, policymakers and others, to inform their development and/or implementation of laws specific to the licensing of physicians who have already trained and practiced medicine outside the United States. It is co-chaired by the Federation of State Medical Boards (FSMB), the Accreditation Council for Graduate Medical Education (ACGME) and Intealth™ (which oversees the Educational Commission for Foreign Medical Graduates - ECFMG). In February 2025, the commission released its first set of recommendations, focused principally on eligibility requirements and related entry considerations for internationally-trained physicians (ITPs) seeking medical licensure under a new, additional licensure pathway.¹ In this document, the commission offers its second set of recommendations, for consideration by state medical boards and potential employers, related to the assessment and supervision of ITPs during their provisional licensure period before they become eligible for a full and unrestricted license to practice medicine.

Internationally-trained physicians, as described in some of the state laws enacted since 2023 to streamline medical licensure to increase access to care in underserved and rural communities, are generally defined as physicians educated and trained abroad who are licensed and have practiced medicine in another jurisdiction. This cohort of physicians represents a relatively small number of international medical graduates (IMGs), the umbrella term used to describe all physicians who have had their medical degree conferred outside the United States. Individuals who are ITPs, as described in most of legislative descriptions, must have previously completed graduate medical education (also known as postgraduate medical education or postgraduate training) that is “substantially similar” to that which is recognized in the United States.

The purpose of the commission’s recommendations is to support the alignment of policies, regulations and statutes, where possible, to add clarity and specificity to statutory and procedural language to better protect the public – the principal mission of all state and territorial medical boards – and to advance the safe delivery of quality health care to all citizens and residents of the United States. This guidance is provided to support those states and territories implementing new licensure pathways where legislation has been enacted and where legislation has been introduced or is being considered for introduction.

The first set of recommendations was focused on eligibility requirements. To ensure physicians entering these pathways are ultimately ready to safely practice medicine in the United States, the additional licensing pathways should optimally include assessment and supervisory elements during the entire period of provisional licensure. This second set of recommendations contains specific guidance for the consideration of state medical boards and other relevant stakeholders.

¹ <https://www.fsmb.org/siteassets/communications/acalm-guidance.pdf>

Background

There are two primary pathways by which international medical graduates (IMGs) are eligible for medical licensure from a state medical board in the United States and its territories:

1. Completion of one to three years – depending on the requirements of the particular state or territory² – of U.S.-based graduate medical education (GME) accredited by the ACGME, accompanied by certification by ECFMG[®] and successful passage of all three Steps of the United States Medical Licensing Examination[®] (USMLE[®]), is the most common pathway to medical licensure for international medical graduates (IMGs) in the United States. In addition to expanding a physician's knowledge and skills in one or more medical or surgical specialties, U.S.-based GME affords time for participants (whether previously trained and licensed abroad or not) to acclimate to the U.S. health care system, culture and social norms, and the medical illnesses and conditions that are most prevalent (e.g., heart disease, cancer, accidents) among those residing in the United States.
2. "Eminence" pathways (for prominent mid-career physicians) have long existed in many states, and typically do not require ECFMG Certification or successful passage of any Step examination of the USMLE, and may continue to be an option for exceptional, highly qualified and fully-trained international physicians. These pathways are most often used by individuals deemed to have "extraordinary ability," including those classified as "eminent specialist" or "university faculty" pursuing academic or research activities, and typically align with the O-1 (extraordinary ability) visa issued by the U.S. State Department.³ Of note, most state medical boards also have statutes or regulations allowing for the licensing of IMGs at their discretion,⁴ though in practice these are not commonly available or offered. A few medical boards explicitly allow postgraduate training (PGT) – also known as graduate medical education (GME) or postgraduate medical education (PGME) – that is completed in certain countries, such as England, Scotland, Ireland, Australia, New Zealand and the Philippines, to count toward the U.S.-based GME requirement for licensure.

Since January 2023, a dozen states have enacted legislation creating additional licensing pathways for internationally trained physicians that does not require completion of U.S.-based ACGME-accredited GME training.

² <https://www.fsmb.org/siteassets/advocacy/policies/img-gme-requirements-key-issue-chart.pdf>

³ <https://www.uscis.gov/working-in-the-united-states/temporary-workers/o-1-visa-individuals-with-extraordinary-ability-or-achievement>

⁴ Several states have authority to issue licenses to internationally trained physicians through other innovative approaches. For example, New York offers licensure without requiring a provisional supervisory period to highly qualified IMGs. California offers a three-year non-renewable license for up to 30 Mexican physicians a year to work in community health centers. Washington has a "clinical experience license" to help IMGs compete for residency matching.

These additional licensing pathways are designed principally for ITPs who wish to enter the U.S. healthcare workforce.

A primary goal of these pathways, reflected in public testimony and written statements submitted by sponsors and supporters in many jurisdictions, is to address U.S. healthcare workforce shortages, especially in rural and underserved areas. It must be noted that U.S. federal immigration and visa requirements will impact the practical ability of physicians who are not U.S. citizens or permanent U.S. residents (Green Card holders) to utilize any additional licensure pathway. Furthermore, the ubiquity of specialty-board certification as a key factor in employment, hospital privileging, and insurance panel inclusion decisions is likely to impact the efficacy of non-traditional licensing pathways. States may, therefore, wish to consider other healthcare workforce levers that may be more effective in increasing access to care, such as advocating for increased state and Medicare/Medicaid funding to expand U.S. GME training positions, offering some means of transition assistance to IMGs, and expanding the availability and utilization of enduring immigration programs like the Conrad 30 waiver program, U.S. Department of Health and Human Services (HHS) waivers, regional commission waivers, and United States Citizenship and Immigration Service (USCIS) Physician National Interest Waivers.

While the wording of additional pathway legislation introduced and/or enacted varies from state to state, the commission's consensus-driven guidance highlights potential areas of alignment and suggests specific considerations and resources for implementation and evaluation of these pathways, where that may be possible. The commission drafted both sets of recommendations based on expert opinion and areas of concordance in legislation already introduced and enacted. The following second set of recommendations are offered for consideration to state medical boards, state legislators, policymakers, employers, and other relevant parties:

1. Internationally-trained physicians (ITPs) should be assessed during the supervisory period on all six general competencies endorsed by the Coalition on Physician Accountability: Patient Care and Procedural Skills, Medical Knowledge, Practice-based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, and Systems-based Practice.
2. ITPs should undergo a formative needs assessment at the beginning of the supervisory period in order to identify areas of strength, and areas where additional support may be needed. Ideally, the needs assessment should include a review of the participant's previous post graduate medical education (PGME) program (aka recognition of prior learning) to the extent possible.
3. A specialty-specific exam, such as an in-training exam, should be used to inform an ITP's learning plan during the supervisory period.
4. At a minimum, a standardized knowledge assessment, direct observation of the ITP's clinical skills, multi-source feedback, and medical record audits should be employed in assessing the ITP. Assessment of, and feedback with, the ITP should occur periodically at regular intervals throughout the supervisory period to support the ITP's professional development and provide robust data to help the responsible institution make

determinations of the ITP's progress. Additionally, during the supervisory period each ITP should demonstrate engagement in a sufficient volume and breadth of cases.

5. By the end of the supervisory period, an ITP should demonstrate the ability to engage in independent and unsupervised practice in all six of the general competency domains for the intended scope of clinical practice.

6. The level of supervision for an ITP during the supervisory period should be tailored to the competence of the individual ITP. At the beginning of the supervisory period this level should be informed by the results of an initial needs assessment and close supervision of all ITPs. Thereafter, the level of supervision should be adjusted based on demonstrated competence. The state medical board may choose to identify/approve the institution or individual supervisor that will be responsible for administering the initial assessment and for making recommendations about the initial level of assessment for the ITP.

7. Supervisors of ITPs during the supervisory period of the additional pathways to licensure should be physicians (MD, DO or equivalent). The supervising physician should have a full and unrestricted license to practice medicine in good standing with specialty board certification in the same specialty as the ITP's specialty. Additionally, state medical boards should establish criteria for qualifications of supervisors and supervisory sites.

8. The rights of ITPs as employees should be taken into consideration to ensure fair and equitable treatment during their supervision period. Institutions should provide ITPs information about their rights as an employee and offer resources to support their wellbeing.

Recommendations

ASSESSMENT

Assessment Framework

1. Recommendation: Internationally-trained physicians (ITPs) should be assessed during the supervisory period on all six general competencies endorsed by the Coalition on Physician Accountability: Patient Care and Procedural Skills, Medical Knowledge, Practice-based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, and Systems-based Practice.

State Medical Board (SMB) Responsibility: SMBs should ensure that the participating institution has incorporated the general competency framework.

Institutional Responsibility: The institution should ensure that the ITP's individual learning plan and assessment program incorporate all six general competencies.

Rationale: The aim of this recommendation is to facilitate the thoughtful provision of an additional licensure pathway for ITPs with comparable training and experience to practice medicine in the United States. The Coalition for Physician Accountability has noted that "a shared mental model of competency across the medical education continuum exists in the ideal state that involves a

standardized set of general competencies.”¹ The general competency framework, which is widely used in the United States to assess residents, fellows, and practicing physicians as part of continuing certification, should also be used to assess ITPs. While the ITP supervisory period in an additional pathway to licensure does not require the same processes (i.e. length and/or intensity of training or supervision) as graduate medical education, it should aim to demonstrate similar outcomes. This will help ensure equivalency of those achieving full and unrestricted licensure and prevent the development of a two-tier system with differing standards for physicians who have entered the US physician workforce through the US GME pathway and those ITPs entering through additional pathways.

Assessment at Start of Supervisory Period

2. Recommendation: ITPs should undergo a formative needs assessment at the beginning of the supervisory period in order to identify areas of strength, and areas where additional support may be needed. Ideally, the needs assessment should include a review of the participant’s previous post graduate medical education (PGME) program (aka recognition of prior learning) to the extent possible.

SMB Responsibility: SMBs should recommend and support an individual needs assessment.

Institutional Responsibility: Institutions should administer or conduct a needs assessment that addresses an ITP’s current understanding and abilities in the general competencies, especially medical knowledge, patient care, and interpersonal skills and communication. It is also recommended that a review of the participant’s previous post graduate medical education (PGME) program (aka recognition of prior learning) be performed to the extent possible. Institutions may wish to consult physician reentry programs about assessment processes used to determine baseline physician capabilities.

Rationale:

The training and clinical experience of ITPs entering these programs will be more varied than those entering GME training, with many ITPs likely possessing more clinical experience than GME trainees.

A baseline assessment of an ITP’s competence will allow for early identification of areas of strength and areas where additional support is needed. This can be used to tailor an efficient learning plan that focuses on addressing areas of need specific to each ITP and supporting areas of an ITP’s strengths. This initial needs assessment should not be used to exclude ITPs from participation in the additional pathway to licensure program. Institutions may wish to engage existing programs to assist in the needs assessment.

Use of Specialty-specific Exam for Assessment of Medical Knowledge

3. Recommendation: A specialty-specific exam, such as an in-training exam, should be used to inform an ITP’s learning plan during the supervisory period

SMB Responsibility: SMBs should recommend a specialty-specific exam.

Institutional Responsibility: Institutions should obtain access to, and scheduling for, specialty-specific exams.

Rationale: Specialty-specific exams may be helpful in assessing medical knowledge but are not intended to serve as summative assessments and should not be used for high stakes decisions. While medical licensure does not absolutely require passing a specialty-specific exam, demonstration of medical knowledge via a multiple-choice question exam is a requirement for specialty certification. Additionally, an MCQ exam could be an important way to assess medical knowledge competence within the ITP's intended scope of clinical practice.

Assessment Strategies During the Supervisory Period

4. Recommendation: At a minimum, a standardized knowledge assessment, direct observation of the ITP's clinical skills, multi-source feedback, and medical record audits should be employed in assessing the ITP. Assessment of, and feedback with, the ITP should occur periodically at regular intervals throughout the supervisory period to support the ITP's professional development and provide robust data to help the responsible institution make determinations of the ITP's progress. Additionally, during the supervisory period each ITP should demonstrate engagement in a sufficient volume and breadth of cases.

SMB Responsibility: SMBs should ensure the assessment program appropriately covers the six general competencies.

Institutional Responsibility: Institutions should implement, monitor, and review the assessment program and ensure all six general competencies are appropriately assessed periodically and the ITP has engaged in a sufficient volume and breadth of cases. If there is concern that the ITP may not be able to demonstrate the ability to engage in independent and unsupervised practice in all six of the general competency domains for the intended scope of clinical practice by the end of the supervisory period based on periodic assessment, the institution should share this information with the SMB whether or not remediation or additional supervisory time is available, contemplated or offered, to come to agreement on a path forward.

Rationale: Ongoing, reliable assessment of an ITP's skills is critical in promoting equivalency in additional licensure programs. Assessments should occur periodically throughout the supervisory period. The combination of standardized knowledge assessment, direct observation of the ITP's clinical skills, multi-source feedback, and medical record audits allows for assessment across the general competency framework. Additional assessment may be tailored to an ITP's specific needs.

Consideration should be given regarding the use of group process to review assessment data and judge the progress of the ITP. (The ACGME program requirement guidelines regarding clinical competency committees could serve as a template.)

A toolkit of assessment instruments and resources is available and will be provided separately.

Competence Demonstrated By the End of the Supervisory Period

5. Recommendation: By the end of the supervisory period, an ITP should demonstrate the ability to engage in independent and unsupervised practice in all six of the general competency domains for the intended scope of clinical practice.

SMB Responsibility: SMBs should ensure the assessment program that is in place can effectively perform a final entrustment judgement regarding the ITP's readiness for unsupervised practice.

Institutional Responsibility: Institutions should support the process regarding a final entrustment judgement of the ITP's readiness for unsupervised practice.

Rationale: Requiring the same level of competency for ITPs seeking licensure through additional pathways as physicians seeking licensure through GME training in the United States will help ensure the safety of the public by avoiding the perception of a two-tiered system with different requirements.

SUPERVISION

Initial Level of ITP Supervision

6. Recommendation: The level of supervision for an ITP during the supervisory period should be tailored to the competence of the individual ITP. At the beginning of the supervisory period this level should be informed by the results of an initial needs assessment and close supervision of all ITPs. Thereafter, the level of supervision should be adjusted based on demonstrated competence. The state medical board may choose to identify/approve the institution or individual supervisor that will be responsible for administering the initial assessment and for making recommendations about the initial level of assessment for the ITP.

SMB Responsibility: SMBs should have oversight of this process and may choose to make specific recommendations regarding institutions and/or supervisors.

Institutional Responsibility: Institutions should support the individuals who are providing close supervision. This will help to ensure patient safety while concomitantly providing rich interaction and assessment data to guide changes in the level of supervision as warranted by the ITP's abilities.

Rationale: The training and clinical experience of ITPs entering these programs will be more varied than those entering GME training, with many ITPs likely having more clinical experience than GME trainees. A baseline assessment of an ITP's skills will help the supervisor/supervising institution make decisions that will allow the ITP to practice within the scope of their skills while ensuring patient safety.

Qualifications of ITP Supervisors and Sites

7. Recommendation: Supervisors of ITPs during the supervisory period of the additional pathways to licensure should be physicians (MD, DO or equivalent). The supervising physician should have a

full and unrestricted license to practice medicine in good standing with specialty board certification in the same specialty as the ITP's specialty. Additionally, state medical boards should establish criteria for qualifications of supervisors and supervisory sites.

SMB Responsibility: SMBs should establish and apply criteria for identification of qualified supervisors and supervisory sites.

Institutional Responsibility: Institutions should support the training of individuals providing supervision, assessment, feedback, and coaching. National resources exist to support this training.

Rationale: Physicians with a full and unrestricted license and specialty board certification in the same specialty should possess the necessary expertise and experience to oversee ITPs safely while providing guidance to help ITPs prepare to meet the challenges of practicing medicine in a relatively new environment. State medical boards may have more region-specific information available to them about potential supervisors and supervisory setting to help guide this process. Institutions may wish to consult physician reentry programs about monitoring and supervision practices.

ITP Employment Considerations:

8. Recommendation: The rights of ITPs as employees should be taken into consideration to ensure fair and equitable treatment during their supervision period. Institutions should provide ITPs information about their rights as an employee and offer resources to support their wellbeing.

Rationale: It is essential to guarantee that internationally trained physicians (ITPs) have access to the same rights, benefits, resources and policies as other employees within the institution to support their wellness and to promote fair and equitable treatment. This includes consideration of appropriate work hours, guidelines for interactions between ITPs and other caregivers and employees, and establishing processes to address any potential concerns.

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DRAFT

Glossary:

Assessment: An ongoing process of gathering and interpreting information about a learner's abilities, including knowledge, skills, attitudes, and/or behavior.

Coalition for Physician Accountability: Consists of the national organizations responsible for the oversight, education and assessment of medical students and physicians throughout their medical careers. <https://physicianaccountability.org/>

Competencies: Specific knowledge, skills, behaviors, and attitudes that physicians must develop for unsupervised practice of a specialty or subspecialty. The six Core Competencies are Professionalism; Patient Care and Procedural skills; Medical Knowledge; Practice-Based Learning and Improvement; Interpersonal and Communication Skills; and Systems-Based Practice. These have been endorsed by the Coalition for Physician Accountability.

Entrustment: The process by which trainees are granted increasing levels of responsibility and autonomy in their clinical work based on demonstrated levels of competence.

Formative Evaluation: Assessment with the primary purpose of providing feedback for improvement, as well as to reinforce skills and behaviors that meet established criteria and performance standards.

Graduate medical education (GME): The period of medical education that follows the completion of recognized undergraduate medical education and that prepares physicians for the independent practice of medicine in a specialty, subspecialty, or sub-subspecialty area, also referred to as residency or fellowship education. May also be referred to as "post-graduate medical education (PGME)."

Internationally Trained Physician (ITP): A medical doctor who has completed their medical education and training outside of the United States.

In-Training Exam: A standardized assessment administered to residents during their training program used to evaluate the medical knowledge residents in their specific specialty.

Milestones: Description of performance levels that describe skills, knowledge, and behaviors in the six Core Competency domains.

Program evaluation: Systematic collection and analysis of information related to the design, implementation, and outcomes of a graduate medical education program, for the purpose of monitoring and improving its quality and effectiveness.

Sponsoring Institution: The organization (or entity) that assumes the ultimate financial and academic responsibility for one or more ITP.

State Medical Board (SMB): the regulatory body established by each state responsible for overseeing the practice of medicine within that state, including licensure and regulation.

Summative Evaluation: An assessment that measures the extent to which learners have achieved specific desired outcomes or competencies. It is often used to make high-stakes decisions.



EXHIBIT E

ALABAMA STATE BOARD OF MEDICAL EXAMINERS

WILLIAM M. PERKINS, EXECUTIVE DIRECTOR

P.O. BOX 946
MONTGOMERY, ALABAMA 36101-0946
848 WASHINGTON AVE.
MONTGOMERY, ALABAMA 36104

TELEPHONE: (334) 242-4116
E MAIL: bme@albme.gov

MEMORANDUM

To: Medical Licensure Commission
From: Mandy Ellis
Date: June 9, 2025
Re: Administrative Rules Approved for Publication

The Board of Medical Examiners, at its meeting June 12, 2025, approved the following rule to be published for public comment in the *Alabama Administrative Monthly*:

- Administrative Rule 540-X-27-.04, *Application for a Bridge Year Graduate Physician Permit*

The application is being amended to comply with the Medical Association of the State of Alabama resolution adopted at the 2024 Annual Session which revises application language to comply with the Lorna Breen Heroes' Foundation.

With an expected publication date of June 30, 2025, the public comment period ends August 4, 2025. The anticipated effective date November 14, 2025.

Attachments:

- Administrative Rule 540-X-27-.04, *Application for a Bridge Year Graduate Physician Permit*

Application For A Bridge Year Graduate
Physician Permit.

(1) To apply for a permit to practice as a bridge year graduate physician, an individual must complete the following:

(a) Submit an application on form(s) approved by the Board;
and

(b) Pay to the Board in advance the required application fee of \$200.00. This fee is nonrefundable once payment is received by the Board.

(c) For the purposes of determining an applicant's suitability to obtain a permit to practice as a bridge year graduate physician, each applicant shall submit to a criminal history background check.

1. Each applicant shall submit to the Board a complete set of fingerprints, either inked cards or electronically, properly executed by a law enforcement agency or an individual properly trained in fingerprinting techniques.

2. The Board shall submit the fingerprints provided to the State Bureau of Investigation (SBI). The fingerprints shall be forwarded by the SBI to the Federal Bureau of Investigation (FBI) for a national criminal history record check.

3. The applicant shall pay directly to the Board, or its designee, a criminal background check fee of sixty--five dollars (\$65.00).

4. The Board shall keep information received pursuant to this subsection confidential, except that such information received and relied upon in denying the issuance of a permit to practice as a bridge year graduate physician in this state may be disclosed as may be necessary to support the denial.

(d) An applicant for a bridge year graduate physician permit shall disclose whether:

1. Applicant has ever been arrested for, cited for, charged with, or convicted of any crime, offense, or violation of any law, felony, or misdemeanor, including, but not limited to, offenses related to ~~the practice of medicine or~~ professional healthcare practice, state or

federal controlled substances laws, or driving under the influence (DUI).

NOTE: This question excludes minor traffic violations such as speeding and parking tickets but includes felony and misdemeanor criminal matters that have been dismissed, expunged, sealed, subject to a diversion or deferred prosecution program, or otherwise set aside.

2. Applicant has ever been arrested for, cited for, charged with, or convicted of any sex offender laws or required to register as a sex offender for any reason.

3. A judgment has ever been rendered against the applicant or action settled relating to an action for injury, damages, or wrongful death for breach of the standard of care in the performance of the applicant's professional service ("malpractice").

4. As of the date of the application, applicant is the subject of an investigation or proposed action by any law enforcement agency.

5. Applicant has ever had any Drug Enforcement Administration registration and/or state-controlled substances registration denied, voluntarily surrendered while under investigation, or subject to any discipline, including, but not limited to revocation, suspension, probation, restriction, conditions, reprimand, or fine.

6. Applicant's medical education, training, or medical practice been interrupted or suspended, or applicant ceased to engage in direct patient care, for a period longer than 60 days for any reason other than a vacation or for the birth or adoption of a child.

7. Applicant was ever placed on academic or disciplinary probation by, or been required to remediate any portion of, a medical school or postgraduate program.

8. Applicant had limitations or special requirements imposed because of questions of academic, clinical, or disciplinary problems, or any other reason during his or her medical education or postgraduate training, such as repeating a class or classes or taking time off from school to study for an examination.

9. Applicant has ever been disciplined for unprofessional conduct/behavior reasons by a medical school or postgraduate program.

10. Applicant has ever been denied prescription privileges for non-controlled or legend drugs by any state or federal authority.

11. Applicant has ever been denied a permit to practice as a bridge year graduate physician, or the equivalent, in any state or jurisdiction, or has had an application for a permit to practice as a bridge year graduate physician, or the equivalent of, withdrawn under threat of denial.

12. Applicant's certification or permit to practice as a bridge year graduate physician, or the equivalent, in any state or jurisdiction has ever been subject to any discipline, including but not limited to revocation, suspension, probation, restrictions, conditions, reprimand, or fine.

13. Applicant's privileges at any hospital or health care facility have ever been revoked, suspended, curtailed, limited, or placed under conditions restricting applicant's practice, if applicable.

14. As of the date of the application, applicant is the subject of an investigation or proposed action by any federal agency, any licensing board/agency, or any hospital or health care facility.

15. ~~Applicant has ever been diagnosed as having or has ever been treated for pedophilia, exhibitionism, or voyeurism~~ is currently suffering from any condition that impairs their judgment or that would otherwise adversely affect their ability to practice medicine in a competent, ethical, and professional manner.

16. Applicant, within the past five years, has raised the issue of ~~consumption of drugs or alcohol or the issue of a mental, emotional, nervous, or behavioral disorder or condition~~ any physical or psychiatric health disorder as a defense, mitigation, or explanation for applicant's actions during any administrative or judicial proceeding or investigation; any inquiry or other proceeding; or any proposed termination by an educational institution; employer; government agency; professional organization; or licensing authority.

17. ~~Applicant, within the past five years, has been convicted of driving under the influence (DUI), or has been charged with DUI and been convicted of a lesser offense such as reckless driving.~~

~~18. Applicant is currently engaged in the excessive use of alcohol or controlled substances or in the use of illegal drugs or receiving any therapy or treatment for alcohol or drug use, sexual boundary issues, or mental health issues.~~

~~(i) If applicant is an anonymous participant in the Alabama Professionals Health Program and is in compliance with their assistance agreement, they may answer "No" to this question. Such answer for this purpose will not be deemed upon certification as providing false information to the Alabama Board of Medical Examiners.~~

~~(ii) The term "currently" as it is used in the paragraph above does not mean on the day of, or even in the weeks or months preceding the completion of the application. Rather, it means recently enough so that the condition referred to may have an ongoing impact on one's functioning as a bridge year graduate physician within the last two years.~~

~~(iii) Applicant shall initial certifying an understanding of a statement of the duty as a permittee to address any such condition, which states as follows:~~

~~IMPORTANT: The Board recognizes that applicants encounter health conditions, including those involving mental health and substance use disorders, The Board recognizes that licensees encounter potentially impairing health conditions just as their patients and other health care providers do, including psychiatric or physical illnesses which may impact cognition, as well as substance use disorders. The Board expects its licensees to address their health concerns, The Board expects its applicants to address their health concerns both mental and physical, in a timely manner to ensure patient safety. Licensees should seek appropriate medical care and should limit their medical practice when appropriate and as needed. The Board encourages licensees to utilize the services of and ensure patient safety. Options include anonymously self-referring to the Alabama Professionals Health Program (334-954-2596), a physician advocacy organization dedicated to improving the health and wellness of medical professionals in a confidential manner. The failure to adequately address a health condition, where the applicant/licensee is unable to practice medicine with reasonable skill and safety to patients, can result in the Board taking action against the permit/license to practice medicine.~~

I have read and understand the statements above.
[Applicant Attestation]

(e) The application form for a bridge year graduate physician permit will request the following of the bridge year graduate physician:

1. Name, home address, email address, place and date of birth, social security number, gender, telephone number(s), education and training experience, specialty, if applicable, examination history, a color photograph taken within sixty days prior to the date of the application, medical school certification, and any additional information the Board deems relevant to the application process.

(f) The application form for a bridge year graduate physician permit and/or a corresponding form for a supervising physician will request the following of the supervising physician:

1. Name, Alabama medical license number, medical specialty, board certification, residency completion date, name of program and completion date of any fellowship, or other supervised training program, principal practice site, telephone number, name and address of the bridge year graduate physician's practice location(s), the number of hours the bridge year graduate physician will practice per week, job description and approved formulary of the bridge year graduate physician, covering physician agreements, if applicable, a certification of the understanding of the responsibilities of a supervising physician, and any additional information the Board deems relevant to the application process.

Author: Alabama Board of Medical Examiners

Statutory Authority: Code of Ala. 1975, §34-24-75.2 and Act No. 23-233.

History: New Rule: Published May 31, 2024; effective July 15, 2024. **Amended:** Published _____; effective _____.

**ALABAMA STATE BOARD OF
MEDICAL EXAMINERS,**

Complainant,

v.

**WENDY R. (GOMEZ) WALKER,
M.D.,**

Respondent.

EXHIBIT

F

**BEFORE THE MEDICAL
LICENSURE COMMISSION OF
ALABAMA**

CASE NO. 2012-007

ORDER

This matter is before the Medical Licensure Commission of Alabama on Respondent's request, submitted via e-mail on June 16, 2025, to amend the Consent Order entered in this matter on April 18, 2012 to vacate the license reprimand imposed in that order. Upon consideration by the full Commission, it is ordered that Respondent's request is granted, and the Consent Order of April 18, 2012 is amended *nunc pro tunc* as follows:

First, by striking out the following:

"1. That the license to practice medicine of the Respondent, WENDY R. GOMEZ, M.D., license certificate number MD.23474, be, and is hereby REPRIMANDED."

Second, by re-numbering the subsequent numbered paragraphs accordingly.

DONE on this the 1st day of July, 2025.

THE MEDICAL LICENSURE
COMMISSION OF ALABAMA

By:

E-SIGNED by Jorge Alsip, M.D.
on 2025-07-01 12:51:19 CDT

Jorge A. Alsip, M.D.
its Chairman

EXHIBIT

G

**ALABAMA STATE BOARD OF
MEDICAL EXAMINERS,**

Complainant,

vs.

GREGORY KEITH PARKER, M.D.,

Respondent.

**BEFORE THE MEDICAL
LICENSURE COMMISSION
OF ALABAMA**

CASE NO. 2025-063

**ORDER TEMPORARILY SUSPENDING LICENSE
AND SETTING HEARING**

The Medical Licensure Commission has received the verified Administrative Complaint and Petition for Summary Suspension of License ("the Administrative Complaint") filed by the Alabama State Board of Medical Examiners in this matter. The Commission has determined that this matter is due to be set down for hearing under the provisions of Ala. Code § 34-24-361(e). This Order shall serve as the Notice of Hearing prescribed in Ala. Admin. Code r. 545-X-3-.03(3), (4). The Commission's legal authority and jurisdiction to hold the hearing in this matter are granted by Article 8, Chapter 24, Title 34 of the Code of Alabama (1975), and the particular sections of the statutes and rules involved are as set forth in the Administrative Complaint and in this Order.

1. Temporary Suspension of License

Upon the verified Administrative Complaint of the Alabama State Board of Medical Examiners, and pursuant to the legal authority of Ala. Code §§ 34-24-361(f) and 41-22-19(d), it is the ORDER of the Commission that the license to practice medicine or osteopathy, license certificate number MD.11523 of GREGORY KEITH PARKER, M.D. ("Respondent"), be, and the same is hereby, immediately SUSPENDED. Respondent is hereby ORDERED and DIRECTED to surrender the said license certificate to the Medical Licensure Commission, at 848 Washington Avenue, Montgomery, Alabama, 36104. Respondent is further ORDERED immediately to CEASE and DESIST from the practice of medicine in the State of Alabama.

This action is taken consistent with the Rules and Regulations of the Board of Medical Examiners and the Medical Licensure Commission and Ala. Code § 34-24-361(f), based upon the request of the Alabama State Board of Medical Examiners upon the Board's finding and certification that the Board presently has in its possession evidence that the continuance in practice of Respondent may constitute an immediate danger to his patients and the public.

Respondent is reminded that the suspension of his or her license to practice medicine in Alabama triggers certain obligations with regard to patient notification

and patient records. *See* Ala. Admin. Code r. 540-X-9-.10(4)(c); 545-X-4-.08(4)(c).

Respondent shall comply with these requirements.

2. Service of the Administrative Complaint

A copy of the Administrative Complaint and a copy of this Order shall be served forthwith upon the Respondent, by personally delivering the same to Respondent if he or she can be found within the State of Alabama, or, by overnight courier, signature required, to Respondent's last known address if he or she cannot be found within the State of Alabama. The Commission further directs that personal service of process shall be made by B. Lavender/R. Johnson, who is designated as the duly authorized agent of the Commission.

3. Initial Hearing Date

This matter is set for a hearing as prescribed in Ala. Code §§ 34-24-360, *et seq.*, and Ala. Admin. Code Chapter 545-X-3, to be held on Thursday, September 25, 2025, at 10:00 a.m., at 848 Washington Avenue, Montgomery, Alabama, 36104. Unless otherwise specified by the Commission, the hearing will be held in person. All parties and counsel are expected to appear and to be prepared for the hearing at this date, time, and place.

4. Appointment of Hearing Officer

The Commission appoints the Honorable William R. Gordon, Circuit Judge (Ret.) as the Hearing Officer in this matter, pursuant to Ala. Admin. Code r. 545-X-3-.08. The Hearing Officer shall exercise general superintendence over all pre-hearing proceedings in this matter, and shall serve as the presiding officer at the hearing, having and executing all powers described in Ala. Admin. Code r. 545-X-3-.08(1)(a)-(g).

5. Answer

Respondent shall file an Answer, as prescribed in Ala. Admin. Code r. 545-X-3-.03(6), within 20 calendar days of the service of the Administrative Complaint. If Respondent does not file such an Answer, the Hearing Officer shall enter a general denial on Respondent's behalf.

6. Rescheduling/Motions for Continuance

All parties and attorneys are expected to check their schedules immediately for conflicts. Continuances will be granted only upon written motion and only for good cause as determined by the Chairman (or, in his absence, the Vice-Chairman) of the Medical Licensure Commission. Continuances requested on grounds of engagement of legal counsel on the eve of the hearing will not be routinely granted.

7. Case Management Orders

The Hearing Officer is authorized, without further leave of the Commission, to enter such case management orders as he considers appropriate to the particular case. Among any other matters deemed appropriate by the Hearing Officer, the Hearing Officer may enter orders addressing the matters listed in Ala. Admin. Code r. 545-X-3-.03(5)(a)-(f) and/or 545-X-3-.08(1)(a)-(g). All parties will be expected to comply with such orders.

8. Manner of Filing and Serving Pleadings

All pleadings, motions, requests, and other papers in this matter may be filed and served by e-mail. All filings shall be e-mailed to:

- The Hearing Officer, William Gordon (wrgordon@charter.net);
- The Director of Operations of the Medical Licensure Commission, Rebecca Robbins (rrobbins@almlc.gov);
- General Counsel of the Medical Licensure Commission, Aaron Dettling (adettling@almlc.gov);
- General Counsel for the Alabama Board of Medical Examiners, Wilson Hunter (whunter@albme.gov); and
- Respondent/Licensee or his or her counsel, as appropriate.

The Director of Operations of the Medical Licensure Commission shall be the custodian of the official record of the proceedings in this matter.

9. Discovery

Consistent with the administrative quasi-judicial nature of these proceedings, limited discovery is permitted, under the supervision of the Hearing Officer. *See* Ala. Code § 41-22-12(c); Ala. Admin. Code r. 545-X-3-.04. All parties and attorneys shall confer in good faith with one another regarding discovery. If disputes regarding discovery are not resolved informally, a motion may be filed with the Hearing Officer, who is authorized to hold such hearings as appropriate and to make appropriate rulings regarding such disputes.

10. Publicity and Confidentiality

Under Alabama law, the Administrative Complaint and this Order are public documents. The hearing itself is closed and confidential. The Commission's written decision, if any, will also be public. *See* Ala. Code § 34-24-361.1; Ala. Admin. Code r. 545-X-3-.03(10)(h), (11).

11. Stipulations

The parties are encouraged to submit written stipulations of matters as to which there is no basis for good-faith dispute. Stipulations can help to simplify and shorten the hearing, facilitate the Commission's decisional process, and reduce the overall costs of these proceedings. Written stipulations will be most useful to the Commission if they are submitted in writing approximately 10 days preceding the

hearing. The Hearing Officer is authorized to assist the parties with the development and drafting of written stipulations.

12. Judicial Notice

The parties are advised that the Commission may take judicial notice of its prior proceedings, findings of fact, conclusions of law, decisions, orders, and judgments, if any, relating to the Respondent. *See* Ala. Code § 41-22-13(4); Ala. Admin. Code r. 545-X-3-.09(4).

13. Settlement Discussions

The Commission encourages informal resolution of disputes, where possible and consistent with public interest. If a settlement occurs, the parties should notify the Hearing Officer, the Commission's Director of Operations, and Commission's General Counsel. Settlements involving Commission action are subject to the Commission's review and approval. To ensure timely review, such settlements must be presented to the Commission no later than the Commission meeting preceding the hearing date. Hearings will not be continued based on settlements that are not presented in time for the Commission's consideration during a monthly meeting held prior to the hearing date. The Commission Vice-Chairman may assist the parties with the development and/or refinement of settlement proposals.

14. Subpoenas

The Commission has the statutory authority to compel the attendance of witnesses, and the production of books and records, by the issuance of subpoenas. See Ala. Code §§ 34-24-363; 41-22-12(c); Ala. Admin. Code r. 545-X-3-.05. The parties may request that the Hearing Officer issue subpoenas for witnesses and/or documents, and the Hearing Officer is authorized to approve and issue such subpoenas on behalf of the Commission. Service of such subpoenas shall be the responsibility of the party requesting such subpoenas.

15. Hearing Exhibits

- A. Parties and attorneys should, if possible, stipulate as to the admissibility of documents prior to the hearing.
- B. The use of electronic technology, USB drives, CD's, DVD's, etc. is acceptable and encouraged for voluminous records. If the Commission members will need their laptop to view documents, please notify the Hearing Officer prior to your hearing.
- C. If providing hard copies, voluminous records need not be copied for everyone but, if portions of records are to be referred to, those portions should be copied for everyone.
- D. If a document is to be referred to in a hearing, copies should be available for each Commission member, the Hearing Officer, the Commission's General Counsel, opposing attorney, and the court reporter (12 copies).
- E. Index exhibits/documents for easy reference.
- F. Distribute exhibit/document packages at the beginning of the hearing to minimize distractions during the hearing.

16. Administrative Costs

The Commission is authorized, pursuant to Ala. Code § 34-24-381(b) and Ala. Admin. Code r. 545-X-3-.08(9) and (10), to assess administrative costs against the Respondent if he or she is found guilty of any of the grounds for discipline set forth in Ala. Code § 34-24-360. The Board of Medical Examiners [X]has / []has not given written notice of its intent to seek imposition of administrative costs in this matter.

17. Appeals

Appeals from final decisions of the Medical Licensure Commission, where permitted, are governed by Ala. Code §§ 41-22-20 and 34-24-367.

DONE on this the 25th day of June, 2025.

THE MEDICAL LICENSURE
COMMISSION OF ALABAMA

By:

E-SIGNED by Jorge Alsip, M.D.
on 2025-06-25 14:28:14 CDT

Jorge Alsip, M.D.
its Chairman

Distribution:

- Honorable William R. Gordon (incl. Administrative Complaint)
- Rebecca Robbins
- Respondent/Respondent's Attorney
- E. Wilson Hunter
- Aaron L. Dettling

EXHIBIT

H

**ALABAMA STATE BOARD OF
MEDICAL EXAMINERS,**

Complainant,

v.

BRIAN E. RICHARDSON, M.D.,

Respondent.

**BEFORE THE MEDICAL
LICENSURE COMMISSION OF
ALABAMA**

CASE NO. 2024-205

ORDER

This matter is before the Medical Licensure Commission of Alabama on Respondent's "Motion to Compel Identification and Justification of Improper Redisclosure of Confidential Complaint Materials by State-Affiliated Individual(s) and for Protective Order (With Exhibit A)," filed on May 20, 2025, and Respondent's "Follow-Up Motion to Compel Identification of Individuals and Disclosure of Records Regarding Unauthorized Access Through iGovsolution.net," filed on June 11, 2025, seeking substantially the same relief. Also before the Commission is Respondent's "Emergency Motion to Stay Enforcement of Suspension Order Pending Judicial Review," filed on June 11, 2025. The Board of Medical Examiners, on June 18, 2025, filed briefs in opposition to all of these motions.

With respect to Respondent's "Motion to Compel Identification" and follow-up filing, to the extent that Respondent's first, second, and third requests for relief

on page 5 of his "Motion to Compel Identification" may be interpreted as motions to compel responses to discovery, these motions are procedurally defective because Respondent has not demonstrated that he has first requested the information sought using any available discovery procedures. Nor has Respondent demonstrated that the information sought is relevant to the Commission's adjudication of the merits of any matter alleged in the Administrative Complaint. The Commission concludes that Respondent's fourth, fifth, sixth, and seventh requests for relief, found on page 6 of his "Motion to Compel Identification," fall outside the Commission's legislatively-defined scope of responsibility.

With respect to Respondent's "Emergency Motion to Stay Enforcement of Suspension Order Pending Judicial Review," the Commission notes that a stay of suspension pending appeal is governed by Ala. Code § 34-24-367. That section provides, in relevant part, that "[n]o stay or supersedeas shall be granted pending judicial review of a decision by the licensure commission to suspend or revoke a license to practice medicine unless a reviewing court, upon proof by the party seeking judicial review, finds in writing that the action of the licensure commission was taken *without statutory authority, was arbitrary or capricious*, or constituted a *gross abuse of discretion*." *Id.* (emphasis added). Respondent has not made any such showings.

Upon consideration by the full Commission, it is ordered that Respondent's motions referenced above are denied.

DONE on this the 7th day of July, 2025.

THE MEDICAL LICENSURE
COMMISSION OF ALABAMA

By:

E-SIGNED by Jorge Alsip, M.D.
on 2025-07-07 14:52:09 CDT

Jorge A. Alsip, M.D.
its Chairman

**ALABAMA STATE BOARD OF
MEDICAL EXAMINERS,**

Complainant,

v.

CRAIG RAYMOND JONES, D.O.,

Respondent.

**EXHIBIT
I**

**BEFORE THE MEDICAL
LICENSURE COMMISSION OF
ALABAMA**

CASE NO. 2024-279

ORDER

This matter is before the Medical Licensure Commission of Alabama on the motion to continue the hearing in this matter filed by the Respondent on June 17, 2025. The Board does not object to the relief sought. For good cause shown, it is ordered that Respondent's motion for a continuance is granted, and the hearing in this matter, previously scheduled for June 25, 2025, is continued and re-set for Wednesday, August 27, 2025, at 10:00 a.m., at 848 Washington Avenue, Montgomery, Alabama.

DONE on this the 1st day of July, 2025.

**THE MEDICAL LICENSURE
COMMISSION OF ALABAMA**

By:

E-SIGNED by Jorge Alsip, M.D.
on 2025-07-01 12:51:05 CDT

**Jorge A. Alsip, M.D.
its Chairman**