



2010/2011 ANNUAL REPORT

OF THE

BUREAU OF HEALTH PROFESSIONS

Michigan Department of Licensing & Regulatory Affairs
Bureau of Health Professions
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Authority: Act 368 of 1978, as amended
Total Copies: 300; Total Cost: \$2,161.44; Unit Cost: \$7.20

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Bureau of Health Professions

Bureau Administration

Rae Ramsdell, Director	(517) 373-8068
Web Site Address	www.michigan.gov/healthlicense
Professional Practice Section	(517) 335-6557

Licensing Division

Joseph Campbell, Director	(517) 373-6873
Application Section	(517) 335-0918
Customer Service Section	(517) 335-0918
Credentials Section	(517) 335-0918
Program Operations Section	(517) 335-0918
Nurse Aide Registry	(517) 241-0554

Investigation Division

Ray Garza, Director	(517) 373-1737
Allegation Section	(517) 373-9196
Investigation Section (Lansing)	(517) 373-1737
Investigation Section (Detroit)	(313) 256-2840
Pharmacy Programs (Lansing)	(517) 373-1737
Michigan Automated Prescription System (MAPS)	(517) 373-1737

Regulatory Division

Vacant, Director	(517) 335-7212
Policy/Board Support Section	(517) 335-0918
Enforcement Section	(517) 373-4972
Compliance Section	(517) 335-3114
Health Professional Recovery Program	(800) 453-3784
Michigan Medical Marihuana Program	(517) 373-0395

Bureau of Health Professions

The mission of the Bureau is to protect and preserve the health, safety and welfare of the citizens of Michigan by supporting a qualified healthcare workforce through the licensing, professional development and regulation of health professionals. Our goals are to:

- Provide a high level of service to all stakeholders by conducting business in a courteous, professional and timely manner.
- Provide a fair, consistent and timely process for those applying for a license or registration and maintain accurate records of those licenses and registrations issued.
- Provide an objective, efficient and timely process for addressing allegations involving health professionals licensed or registered by the Bureau and develop proactive policies and procedures designed to enhance the health, safety and welfare of the citizens of Michigan.
- Promote the continuous development of the individual health professional and address current and emerging issues of the health care industry.
- Provide the public with information and educational resources regarding the licensing, regulation and practice standards of health professions.
- Collaborate with stakeholders to explore issues impacting the supply, training and employment of individual health care professions.

The authorization of each of the designated professions is through legislative action or federal mandate as in the case of the nurse aide registry. Most of the professions have a board consisting of licensed health professionals and public members who establish the educational, examination and general practice requirements. These requirements are established either in the legislation that authorizes the regulation of the profession or in the administrative rules for that board. Additionally the boards are responsible for disciplining licensed/registered individuals who violate the provisions of the Public Health Code, PA 368 of 1978, as amended. The board members are appointed by the Governor and typically serve for two terms of four years each.

The board elects a chair and a vice chair each year. These individuals can be either licensed professionals or public members. The board chair must appoint a disciplinary subcommittee which consists of two public members and three professional members. The disciplinary subcommittee must be chaired by a public member. This committee reviews most of the disciplinary cases and determines the sanction that needs to be imposed on the regulated individual.

Regulation of the health professionals come in three different levels of authorized practice:

- license where only health professionals that hold the credential can practice in Michigan
- registration where only health professionals who hold the credential can call themselves by that name but other qualified individuals can practice that profession as long as they do not use the protected title

- certification where a registry is created that indicates individuals who have met a specified level of educational training and experience and completed an examination, if appropriate. Neither the title nor the practice are limited to those who hold the credential but all of those who hold the credential have met pre-established criteria

The Bureau is divided into four operational divisions: Administration, Licensing, Investigation and Regulatory.

The **Administration Division** establishes overall policy for the Bureau, handles personnel, tracks legislation that may impact professions, provides support for the Professional Practice Section and the Advisory Committee on Pain and Symptom Management.

The **Licensing Division** is responsible for all aspects of the application and renewal process for all of the Bureau's regulated professions as well as the continuing education program for the relevant boards. The Licensing Division also is responsible for the approval of educational programs for nurses and nurse aides. The staff who operate the Long Term Care Background Check process, which determines eligibility to work based on mandatory inquiries by employers regarding the criminal history of applicants, was transferred to the Licensing Division.

The **Investigation Division** receives any reports regarding possible violations of the Public Health Code by regulated individuals. They review the allegations, investigate cases authorized for further review by the Boards and collect any information that will assist in identifying individuals who may be endangering the public. They also oversee the automated controlled substance prescription tracking system and pharmacy inspections and operations.

The **Regulatory Division** is responsible for filing formal complaints against individuals based on the information provided by the Investigation Division and completing the disciplinary process with final decisions made by the relevant board. Any disciplined licensee must also be monitored by the Division to ensure that the terms of board orders are met. Additionally, this Division oversees the meetings of each of the boards and the promulgation of administrative rules and responds to Freedom of Information Act requests for information. The oversight of the Health Professional Recovery Program, which provides a non-punitive monitoring program for regulated individuals who have substance abuse or mental health disorders that are impacting their ability to practice, is also part of this Division's responsibility. With the passage of a ballot proposal in November 2008, this Division also became responsible for the registry of users of medical marijuana.

The Bureau of Health Professions was transferred from the Michigan Department of Community Health to Licensing and Regulatory Affairs through Governor Snyder's Executive Reorganization Order #2011 effective April 25, 2011. All of the Bureau responsibilities and rule-making authorities were transferred at that time as well. The oversight of the Nurse Professional Fund was returned to the Bureau of Health Professions but an interagency agreement was established with the Department of Community Health to continue the on-going activities related to the nursing profession. Rae Ramsdell was designated as the Acting Bureau Director when Melanie Brim stayed with the Department of Community Health.

Additional information for many of these programs can be located in this report.

Fiscal Year 2010/2011 Budget

Appropriated F.T.E.s	149
Legislative Appropriation	\$27,445,707
FINANCIAL PLAN:	
Salary and Wages	\$7,617,713
Longevity and Insurance	\$1,740,843
Retirement & FICA	\$2,623,510
Terminal Leave	\$10,397
CSS&M	\$1,064,141
Communications	\$109,147
Equipment	\$1,183
Miscellaneous	\$3,719,665
Rent	\$62,835
Travel	\$199,453
Contracts	<u>\$6,096,566</u>
TOTAL	\$23,245,453

Licensing Statistics

<i>Professions Licensees</i>	<i>Applications Received</i>	<i>Examinations # of Applicants Processed</i>	<i>Written Verifications/ Certifications</i>	<i>Renewals</i>	<i>Total Licensees</i>
Acupuncture Acupuncturists	30				9
Athletic Trainer Athletic Trainer	653		26	690	954
Temporary AT	0				0
Audiology Audiologist	29		15	223	530
Audiologist Limited	0			0	0
Chiropractic Chiropractors	140		118	1,323	2,910
Ed. Ltd. Chiropractor	23			0	8
Counseling Counselors	331		58	1,582	5,814
Ed. Ltd. Counselors	549			2,331	2,720
Dentistry Dentists	232		280	2,378	7,736
Dentist Limited	0			2	2
Dentist – Nonclinical Ltd.	0			1	1
Ed. Ltd. Dentists	24			21	49
Clinical Academic Dentists	2			42	69
Dental Specialists		12 (92% Passed)	0		
Prosthodontist	1			19	59
Endodontist	6			49	174
Oral Surgeon	3			64	233
Orthodontist	6			104	369
Pediatric Dentist	7			42	126
Periodontist	5			46	151
Oral Pathologist	0			3	8
Dental Hygienists	315		208	3,292	10,400
Clinical Academic Hygienists	0			0	0
Nitrous Oxide Certification	77				2,327
Local Anesthesia Certification	81				2,975
Dental Assistants	133	136 (82% Passed)	4	490	1,566
Dental Asst – Clinical Acad	2			0	0
Dental Asst – Nonclinical Ltd.	0			1	1
Dentist – Special Volunteer	2			4	14

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Bureau of Health Professions**

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<i>Professions Licensees</i>	<i>Applications Received</i>	<i>Examinations # of Applicants</i>	<i>Written Verifications/ Certifications</i>	<i>Renewals</i>	<i>Total Licensees</i>
Marriage and Family Therapy					
Marriage & Family Therapists	35	17 (65% Passed)	6	331	693
Ed. Ltd. MFT	31			68	100
Medicine					
Medical Doctors	1,659	294 (93% Passed)	*197	10,499	32,250
Medical Doctor – Limited	0			0	0
MD – Special Volunteer	2			0	29
Clinical Academic MD	28			34	58
Ed. Ltd. MD	1,319			2,713	4,025
Nurse Aides		23,795		20,074	56,634
Nursing					
Registered Nurses	7,338	6,138 (83% Passed)	*4,696	65,711	135,298
RN Provisional	136				55
RN Temporary	33				20
Nurse Specialists					
Anesthetists	135			1,226	2,463
Midwives	15			156	324
Practitioners	388			1,949	4,194
Practical Nurses	2,183	1,969 (87% Passed)	431	12,985	27,449
Nursing Home Administrators	160	State 122 (70% Passed) Nat'l 143 (50% Passed)	37	434	1,260
Occupational Therapy					
Occupational Therapists	261		191	2,194	4,824
Occupational Therapy Assts.	142		42	684	1,450
Optometry					
Optometrists	64		44	797	1,626
DPA Specialty Certification	3			0	1,550
TPA Specialty Certification	0			0	1,518
OPT & TPA Specialty Cert.	8				30
Osteopathic Medicine & Surgery					
Osteopathic Doctors	391		*22	2,256	6,904
Clinical Academic DO	0			0	0
Ed. Ltd. DO	491			778	1,262
Osteo – Special Volunteer	0			0	1

**Department of Licensing & Regulatory Affairs
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<i>Professions Licensees</i>	<i>Applications Received</i>	<i>Examinations # of Applicants</i>	<i>Written Verifications/ Certifications</i>	<i>Renewals</i>	<i>Total Licensees</i>
Pharmacy					
Pharmacists (NAPLEX)	633	478 (85% Passed)	273	6,446	13,218
Jurisprudence		640 (85% Passed)			
Ed. Ltd. Pharmacists	500			1,116	1,475
Pharmacies	236		139	1,563	3,179
Manufacturer/Wholesaler	257		133	617	1,197
Physical Therapy					
Physical Therapists	380	501 (50% Passed)	644	4,474	9,245
Physical Therapy Assist.	2,022		59	0	1,377
Phys Ther Assist - Limited	94	409 (69% Passed)		0	1,963
Physician's Assistant					
Physician Assistants	304		138	1,804	3,821
Physician Assist. Temporary	6			0	7
Podiatric Medicine and Surgery					
Podiatrists	28	11 (100% Passed)	174	257	772
Ed. Ltd. Podiatrists	36			29	63
Pod. Educ. Preceptorships	1				0
Psychology					
Psychologists	122	153 (60% Passed)	103	1,362	2,909
Doctoral Limited	180			156	241
Masters Limited	272			1,664	3,579
Temporary Limited	48				434
Respiratory Care					
Respiratory Therapists	331		75	2,347	5,052
Resp Ther Temporary	0			28	29
Sanitarian					
Sanitarians	4		0	267	484
Social Work					
Social Services Technician	93		228	209	1,592
Social Services Ltd. Tech.	9			20	26
Bachelors Social Worker	69	38 (74% Passed)		142	4,632
Bachelors Ltd. S.W.	253			595	824
Masters Social Worker	786	Clinical 631 (58% Passed) Macro 89 (55% Passed)		1,091	14,285
Masters Ltd. S.W.	1,016			2,965	3,937
MSW Macro Specialty	13			0	11,939
MSW Clinical Specialty	12			0	14,034

<i>Professions Licensees</i>	<i>Applications Received</i>	<i>Examinations # of Applicants</i>	<i>Written Verifications/ Certifications</i>	<i>Renewals</i>	<i>Total Licensees</i>
Veterinary Medicine					
Veterinarians	175		242	1,868	3,805
Clinical Academic Vet.	12			58	75
Ed. Ltd. Vet.	1			2	3
Veterinary Technicians	207	Mich. 220 (81% Passed) Nat'l 155 (84% Passed)	25	1,038	2,522
TOTAL	25,472		8,608	145,641	330,834
	(Total Licensees does not include Nurse Aides or Specialty Certifications)				

**Effective 01/01/09 Board of Medicine and Osteopathic Medicine verifications (to other state boards only) are now being processed by VeriDoc licensing system.*

**Effective 10/1/11 Board of Nursing verifications (to other state boards only) are now being processed by NURSUS licensing systems.*

Disciplinary Actions

Profession	Reprimand	Probation	Fine	Voluntary Surrender	Limited License	Suspension	Revocation	Total
Acupuncture	0	0	0	0	0	0	0	0
Athletic Trainers	0	0	0	0	0	0	0	0
Audiology	1	0	0	0	0	0	0	1
Chiropractic	0	7	2	4	1	4	1	19
Counseling	0	2	0	0	0	7	0	9
Dentistry	0	33	9	4	1	8	2	57
Marriage & Family Therapy	0	0	0	0	0	0	0	0
Medicine	1	21	25	5	15	15	1	83
Nursing	13	166	8	16	6	131	4	344
Nursing Home Administrators	0	6	1	2	0	0	0	9
Occupational Therapy	1	1	1	0	1	3	2	9
Optometry	1	3	0	1	0	0	0	5
Osteopathic Med & Surgery	0	8	7	2	2	6	1	26
Pharmacy	9	20	31	6	5	20	1	92
Physical Therapy	0	1	1	0	0	2	1	5
Physician's Assts.	0	1	0	0	2	0	1	4
Podiatric Med & Surgery	0	2	1	0	1	1	0	5
Psychology	0	2	3	0	3	4	1	13
Respiratory Care	0	1	0	0	0	2	0	3

**Department of Licensing & Regulatory Affairs
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Profession	Reprimand	Probation	Fine	Voluntary Surrender	Limited License	Suspension	Revocation	Total
Sanitarians	0	0	0	0	0	0	0	0
Social Work	0	35	3	4	4	13	1	60
Veterinary Medicine	0	1	3	0	0	1	0	5
Bureau Totals	26	310	95	44	41	217	16	749

Michigan Board of Acupuncture

The Michigan Board of Acupuncture was created with the enactment of Public Act 30 of 2006, which amended the Public Health Code, Public Act 368 of 1978.

The practice of acupuncture, as defined in the Public Health Code, means the insertion and manipulation of needles through the surface of the human body at specific locations on the human body for the prevention or correction of disease, injury, pain, or other condition.

The Board of Acupuncture consists of 13 voting members: 7 acupuncturists, 3 physicians and 3 public members.

Board Members	Term Expires
Lincoln, Deborah E., R.N., M.S.N., Chair East Lansing	6/30/14
Pettet, Jason T., Vice Chair (until 6/2011) South Haven	6/30/11
Abel-Horowitz, Howard, M.D. Franklin	6/30/13
Batzer, Margaret Manistee	6/30/14
Haas, Annie East Lansing	6/30/14
Kimpinto, Echo Birmingham	6/30/14
Morris, Charles, Public Member Detroit	6/30/14
Pappas, John L., M.D. Bloomfield Hills	6/30/14
Roach, Chrystal, Public Member Fremont	6/30/14
Sousley, Rhonda, Ph.D. Rochester Hills	6/30/12
Steigenga, Matthew, Public Member East Lansing	6/30/11
Wright, Leonard D., M.D. Muskegon	6/30/13

The following appointment was made on 11/19/10:

Houchen, Craig Grand Rapids	6/30/11
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The following appointments were made on 8/11/11:

Krofcheck, David, OMD Richland (Replaced Pettet)	6/30/15
Sullivan, William, Public Member Dewitt (Replaced Steigenga)	6/30/15
Tan, Xiaohong, OMD East Lansing (Replaced Houchen)	6/30/15

**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 15, 2010 (cancelled)
January 21, 2011 (cancelled)
April 15, 2011 (cancelled)
July 15, 2011 (cancelled)

Licensing Activity

Applications Received	30
Number of Licensees	9

Regulatory Activity

Allegations Received	0
Administrative Investigations	0
Field Investigations Authorized	0
Field Investigations Completed	0
Administrative Complaints Filed	0
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0

The first set of rules to implement registration for Acupuncturists was filed with the Office of the Great Seal/Secretary of State on March 10, 2011 with an effective date of March 10, 2011.

R 338.13001

A new rule that lists definitions for terms used in the rules.

R 338.13003

A new rule that establishes the minimum level of regulation necessary to protect the public by specifying curriculum requirements for an acupuncture educational program and certification requirements for an acupuncturist registrant.

R 338.13005

A new rule that establishes the application requirements for acupuncturist registration.

R 338.13010

A new rule that establishes the requirements to obtain an acupuncturist registration by endorsement.

R 338.13015

A new rule that establishes the registration requirements for applicants with non-accredited training.

R 338.13020

A new rule that establishes the requirements for renewal of an acupuncturist registration.

R 338.13025

A new rule that establishes the re-registration requirements for an acupuncturist.

R 338.13030

A new rule that provides for the Board's adoption by reference of educational program standards.

R 338.13035

A new rule that specifies how an acupuncturist will practice under delegated supervision in accordance with sections 16104, 16109, and 16215(3) of the Public Health Code.

R 338.13040

A new rule that specifies the retention, disposition, and confidentiality of patient records.

R 338.13045

A new rule specifying acts or omissions by an individual covered by the rules that are considered prohibited conduct.

Michigan Athletic Trainer Board

The Michigan Athletic Trainer Board was created with the enactment of Public Act 54 of 2006, which amended the Public Health Code, Public Act 368 of 1978.

The practice of athletic training, as defined in the Public Health Code, means the treatment of an individual for risk management and injury prevention, the clinical evaluation and assessment of an individual for an injury or illness, or both, the immediate care and treatment of an individual for an injury or illness, or both, and the rehabilitation and reconditioning of an individual's injury or illness, or both, as long as those activities are within the rules promulgated for this profession and performed under the direction and supervision of an individual licensed as an allopathic or osteopathic physician.

The Athletic Trainer Board consists of 11 voting members: 6 athletic trainers, 2 licensed physicians and 3 public members.

Board Members	Term Expires
Berry, Ann L., Chair Canton	12/31/13
Corbin, Dennis R., Vice Chair Kalamazoo	12/31/13
Abendour, Michael Grosse Pointe Woods	6/30/14
Baker, Robert J., M.D. Kalamazoo	12/31/12
Bupp, William F., Public Member Dewitt	6/30/14
Cartwright, Lorin, Public Member Ann Arbor	6/30/14
Eyers, Christina Holt	12/31/12
Nassar, Lawrence G., D.O. Holt	12/31/13
Ryan, Laurie L. Ada	12/31/11
Snyder, Rosemary Ann Arbor	6/30/14

Schedule of Board Meetings

- Fiscal Year 2010/2011**
 October 1, 2010
 November 19, 2010
 February 18, 2011
 May 20, 2011 (cancelled)
 August 19, 2011

Licensing Activity

Applications Received	653
Number of Licensees	954

Regulatory Activity

Allegations Received	0
Administrative Investigations	0
Field Investigations Authorized	0
Field Investigations Completed	0
Administrative Complaints Filed	0
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0

Michigan Board of Audiology

The Michigan Board of Audiology was created with the enactment of Public Act 97 of 2004, which amended the Public Health Code, Public Act 368 of 1978.

The practice of audiology, as defined in the Public Health Code, means the nonmedical and nonsurgical application of principles, methods, and procedures related to disorders of hearing.

The Michigan Board of Audiology consists of 9 voting members: 5 audiologists, 2 members licensed to practice medicine or osteopathic medicine and surgery who hold a certificate of qualification from the American Board of Otolaryngology and 2 public members.

Board Members	Term Expires
Kasewurm, Gyl A., Chair (until 6/2011) St. Joseph	6/30/11
Korpela, Lari P., Vice Chair Livonia	6/30/13
Frank, Peggy Twin Lake	6/30/14
Jacobs, Karen A. Rockford	6/30/11
Kauffman, Steven, Public Member Grandville	6/30/12
Kollaritsch, Joe, Public Member Clarkston	6/30/12
Mukkamala, Srinivas B., M.D. Flint	6/30/14
Schroeder, Virginia Dearborn Heights	6/30/12
Seidman, Michael D., M.D. West Bloomfield	6/30/12

The following appointments were made on 7/21/11:

Kileny, Paul, PhD Ann Arbor (replaced Kasewurm)	6/30/15
O'Connor, Thomas, Chair (as of 9/2011) Lansing (replaced Jacobs)	

Schedule of Board Meetings Fiscal Year 2010/2011

December 17, 2010 (cancelled)
March 18, 2011 (DSC only)
June 17, 2011 (cancelled)
September 16, 2011

Licensing Activity

Audiologists

Applications Received	29
Number of Licensees	530

Audiologists – Limited

Applications Received	0
Number of Licensees	0

Random Continuing Education Audits

Audited	23
Complied	pending

Regulatory Activity

Allegations Received	1
Administrative Investigations	7
Field Investigations Authorized	0
Field Investigations Completed	1
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	1
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	1
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0

Michigan Board of Chiropractic

The Michigan Board of Chiropractic was originally formed with the enactment of Public Act 145 of 1933. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of chiropractic as defined in the Public Health Code means that discipline within the healing arts that deals with the human nervous system and the musculoskeletal system and their interrelationship with other body systems.

The Michigan Board of Chiropractic consists of 9 voting members: 5 chiropractors and 4 public members.

Board Members	Term Expires
Cogan, Solomon, D.C., Chair West Bloomfield	12/31/12
Odette, Patricia, D.C., Vice Chair (until 12/2010) Woodhaven	12/31/10
Rodnick, Corey, D.C., Vice Chair (as of 3/2011) Midland	12/31/11
Eisman, Jeffrey, D.C. West Bloomfield	12/31/10
Fellow, Charles, Public Member South Lyon	12/31/11
Knight, Philip, D.C. Marshall	12/31/11
Stuart, Mark, Public Member Battle Creek	12/31/13
Thompson, Kathleen, Public Member Portage	12/31/13
Vittone, Julann, Public Member Lansing	12/31/13

The following appointments were made on 2/4/11:

Dean, Christophe, D.C. Troy (replaced Eisman)	12/31/14
Klapp, Thomas, D.C. Ann Arbor (replaced Odette)	12/31/14

Schedule of Board Meetings

Fiscal Year 2010/2011

November 18, 2010
 January 13, 2011 (cancelled)
 March 10, 2011
 May 12, 2011
 July 14, 2011
 September 15, 2011

Licensing Activity

Chiropractors

Applications Received	140
Number of Licensees	2,910

Educational Limited Chiropractors

Applications Received	23
Number of Licensees	8

Random Continuing Education Audits

Audited	72
Complied	65

Renewal Continuing Education Audits

Audited	5
Complied	5

Regulatory Activity

Allegations Received	37
Administrative Investigations	75
Field Investigations Authorized	4
Field Investigations Completed	10
Administrative Complaints Filed	10
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	7
Fine	2
Voluntary Surrender	4
Limited License	1
Suspension	4
Revocation	1
Total Disciplinary Actions	19

Michigan Board of Counseling

The Michigan Board of Counseling was created by Public Act 421 of 1988 which was an amendment to the Public Health Code, Public Act 368 of 1978, as amended.

The Public Health Code defines the practice of counseling to mean the rendering to individuals, groups, families, organizations, or the general public, a service involving the application of clinical counseling principles, methods, or procedures for the purpose of achieving social, personal, career, and emotional development and with the goal of promoting and enhancing healthy, self-actualizing and satisfying lifestyles whether the services are rendered in an educational, business, health, private practice, or human services setting.

The Michigan Board of Counseling consists of 11 voting members: 6 counselors, 1 mental health professional and 4 public members.

Board Members	Term Expires
Turowski, Marion, L.P.C., Chair Troy, Chair	6/30/13
Itskowitz, Stuart G., L.P.C., Vice Chair (until 6/2011) St. Clair Shores	6/30/11
Hampton, Steven D., L.M.S.W., Vice Chair (as of 9/2011) Grand Ledge	6/30/14
Burkett, Martha, L.P.C. Grand Rapids	6/30/12
Hunt, Meredith, Public Member Sturgis	6/30/14
LeClear, Laura, Public Member Richland	6/30/14
Owens, Delila L., Ph.D., L.P.C. Royal Oak	6/30/11
Singleton, Harriet A., L.P.C. Kentwood	6/30/12
Wuori, Thomas J., Public Member Kalamazoo	6/30/14

The following appointments were made on 6/9/11:

Jiddou, Ramsey, Public Member Plymouth (replaced Kelley)	6/30/13
Ramey, Luellen, L.P.C. Rochester Hills (replaced Steward)	6/30/13

The following appointment was made on 7/26/11:

Munley, Patrick, Ph.D. Kalamazoo (replaced Owens)	6/30/15
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The following appointment was made on 9/22/11:

Parfitt, Diane, Ph.D. Ypsilanti (replaced Itskowitz)	6/30/15
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Schedule of Board Meetings
Fiscal Year 2010/2011

December 3, 2010
March 23, 2011 (cancelled)
June 3, 2011
September 9, 2011

Licensing Activity

Counselors

Applications Received	331
Number of Licensees	5,814

Educational Limited Counselors

Applications Received	549
Number of Licensees	2,720

Regulatory Activity

Allegations Received	36
Administrative Investigations	27
Field Investigations Authorized	14
Field Investigations Completed	4
Administrative Complaints Filed	2
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	2
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	7
Revocation	0
Total Disciplinary Actions	9

Michigan Board of Dentistry

The Michigan Board of Dentistry was originally formed with the enactment of Public Act 122 of 1919. This Act regulated the practice of dentistry and dental hygiene in the State of Michigan, including providing for examination, licensing and regulation of persons practicing dentistry and dental hygiene; authorizing dental assistants; and providing for the discipline of offenders against the Act.

On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended, and included certification of specialists in the fields of orthodontics, endodontics, prosthodontics, pediatric dentistry, periodontics, oral and maxillofacial surgery, and oral pathology.

The practice of dentistry, as defined by the Public Health Code, means the diagnosis, treatment, prescription, or operation for a disease, pain, deformity, injury, or physical condition of the human tooth, teeth, alveolar process, gums or jaws, or their dependent tissues, or an offer, undertaking, attempt to do, or holding oneself out as able to do any of these acts.

The practice of dental hygiene, as defined by the Public Health Code, means practice at the assignment of a dentist in that specific area of dentistry based on specialized knowledge, formal education, and skill with particular emphasis on preventive services and oral health education.

Practice as a dental assistant, as defined by the Public Health Code, means assistance in the clinical practice of dentistry based on formal education, specialized knowledge, and skill at the assignment and under the supervision of a dentist.

The Michigan Board of Dentistry consists of 19 voting members: 8 dentists, 2 dentists who have been issued a health profession specialty certification, 4 dental hygienists, 2 registered dental assistants, and 3 public members.

Board Members	Term Expires
Spencer, Craig W., D.D.S., Chair East Lansing	6/30/15
Hodder, Joanne A., R.D.H., Vice Chair (until 8/2011) Grand Rapids	6/30/13
Hines, Diane, D.D.S., Vice Chair (as of 8/2011) Detroit	6/30/14
Hornyak, Lynn, R.D.H. (resigned 6/9/11) Dewitt	6/30/12
Bera, Julie, R.D.A. Rockford	6/30/14
Buchheister, Jo Ann, C.D.A., R.D.A., B.S. Troy	6/30/11
Haber, Lawrence M., D.D.S. Commerce Township	6/30/13
Hennessy, Rhonda, D.D.S. Northville	6/30/12

Manos, Deborah, D.D.S. Grosse Pointe Woods	6/30/12
Maturo, Raymond, D.D.S. Ann Arbor	6/30/12
Molinari, John, Ph.D., Public Member Northville	6/30/13
Pesis, Solomon K., D.D.S. Milford	6/30/11
Priestap, Deborah E., D.D.S. Milford	6/30/14
Sanders, Rosetta, Public Member Battle Creek	6/30/12
Schmakel, Timothy, D.D.S., M.D. Bloomfield	6/30/11
Snow, Charlene, Public Member Detroit	6/30/11
Swiger, Martha, R.D.H. Petoskey	6/30/12
Wright, William, D.D.S. Lansing	6/30/13
Wyche, Charlotte, R.D.H. Chelsea	6/30/11

The following appointments were made on 6/29/11:

Briskie, Daniel, D.D.S. Grand Blanc (replaced Schmakel)	6/30/15
Franklin, Sandra, R.D.H. St. Clair Shores (replaced Wyche)	6/30/15
Hondorp, Donna, Public Member Williamston (replaced Snow)	6/30/15
Kaysserian, Kerry, D.D.S. Traverse City (replaced Pesis)	6/30/15
Stamm, Carol, R.D.A. Howell (replaced Buchheister)	6/30/15

The following appointment was made on 9/12/11:

Darrow, Lisa, R.D.H. Grand Rapids (replaced Hornyak)	6/30/12
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**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 14, 2010
December 9, 2010
February 10, 2011
April 14, 2011
June 9, 2011
August 11, 2011

Licensing Activity

Dentists

Applications Received	232
Number of Licensees	7,736

Dentist – Limited

Applications Received	0
Number of Licensees	2

Dentist – Nonclinical Limited

Applications Received	0
Number of Licensees	1

Dentist – Special Volunteer

Applications Received	1
Number of Licensees	14

Dental Specialty Licenses

Prosthodontists

Applications Received	1
Examinations Administered	0
Number of Specialty Licensees	59

Endodontists

Applications Received	6
Examination Administered	5
Number of Specialty Licensees	174

Oral Surgeons

Applications Received	3
Examinations Administered	2
Number of Specialty Licensees	233

Orthodontists

Applications Received	6
Examinations Administered	3
Number of Specialty Licensees	369

Pediatric Dentists

Applications Received	7
Examinations Administered	0
Number of Specialty Licensees	126

Periodontists

Applications Received	5
Examinations Administered	2
Number of Specialty Licensees	151

Oral Pathologists

Applications Received	0
Number of Specialty Licensees	8

Educational Limited Dentists

Applications Received	24
Number of Licensees	49

Clinical Academic Dentists

Applications Received	2
Number of Licensees	69

Registered Dental Hygienists

Applications Received	315
Number of Licensees	10,400

Clinical Academic Hygienists

Applications Received	0
Number of Licensees	0

Specialty Certifications for Dental Hygienists

Nitrous Oxide

Applications Received	77
Number of Certifications	2,327

Local Anesthesia

Applications Received	81
Number of Certifications	2,975

Registered Dental Assistants

Applications Received	133
Examinations Administered	136
Number of Licensees	1,556

Dental Assistant – Nonclinical Ltd.

Applications Received	0
Number of Licensees	1

Dental Assistant – Clinical Academic

Applications Received	2
Number of Licensees	0

Random Continuing Education Audits

(audit still being conducted)

Dentists

Audited	65
Complied	56

Dental Assistants

Audited	13
Complied	9

Dental Hygienists

Audited	103
Complied	84

Renewal Continuing Education Audits

Dentists

Audited	45
Complied	45

Dental Assistants

Audited	3
Complied	3

Dental Hygienists

Audited	27
Complied	27

Regulatory Activity

Allegations Received	323
Administrative Investigations	511
Field Investigations Authorized	106
Field Investigations Completed	101
Administrative Complaints Filed	61
Summary Suspensions Filed	4
Cease and Desist Orders Issued	6
Order to Compel Issued	1

Board Disciplinary Actions

Reprimand	0
Probation	33
Fine	9
Voluntary Surrender	4
Limited License	1
Suspension	8
Revocation	2
Total Disciplinary Actions	57

Rule Changes

**Filed with the Office of the Great Seal/Secretary of State on February 23, 2011
Effective February 23, 2011**

R 338.11101

Rule on definitions was amended to make a technical correction.

R 338.11239

Rule amended to clarify the requirements for the registered dental assistant examination.

R 338.11247

Rule amended to clarify the requirements for obtaining a limited license for a dentist, dental hygienist and dental assistant.

R 338.11255

Rule amended to clarify the requirements for licensure by endorsement of a dentist.

R 338.11259

Rule amended to clarify the requirements for licensure by endorsement of a dental hygienist.

R 338.11261

Rule amended to clarify the requirements for licensure by endorsement of a dental assistant.

R 338.11267

Rule amended to clarify the requirements for licensure by endorsement of a specialty.

R 338.11404

Rule amended to clarify the requirements for the delegation to a dental assistant of intra-oral procedures under direct supervision of a dentist.

R 338.11404a

A new rule that permits the assignment of specified intra-oral procedures to a dental assistant.

R 338.11405

Rule amended to clarify the requirements for the performance by a dental assistant of specified intra-oral procedures under general supervision of a dentist.

R 338.11405a

Rule amended to clarify the requirements for the assignment to a dental assistant of specified intra-oral procedures under direct supervision of a dentist.

R 338.11408

Rule amended to clarify the requirements for the assignment of specified intra-oral procedures to a dental hygienist.

R 338.11409

Rule amended to clarify the requirements for the performance by a dental hygienist of specified intra-oral procedures under direct supervision of a dentist.

R 338.11501

Rule amended to update information regarding recognition by the board of certain specialties in dentistry.

R 338.11503

Rule amended to clarify the eligibility requirements for the state board specialty examination.

R 338.11505

Rule amended to clarify the general requirements for specialty licenses.

R 338.11507

Rule amended to clarify the requirements for reexamination of the specialty examination.

R 338.11509

Rule amended to clarify the procedure for reexamination of the specialty examination when the candidate has failed the examination twice.

R 338.11511

Rule amended to clarify the procedure for reexamination of the specialty examination when the candidate has failed the examination three times.

R 338.11512

Rule amended to clarify the general requirements for obtaining a specialty license in oral and maxillofacial pathology.

R 338.11513

Rule amended to clarify the specialty examination content requirements for a specialty license in oral and maxillofacial pathology.

R 338.11515

Rule amended to clarify the licensure and examination content requirements for a specialty license in orthodontics and orthodontics and dentofacial orthopedics.

R 338.11517

Rule amended to clarify the general licensure and examination requirements for a specialty license in prosthodontics.

R 338.11519

Rule amended to clarify the specific licensure and examination content requirements for a specialty license in prosthodontics.

R 338.11521

Rule amended to clarify the general licensure and examination requirements for a specialty license in pediatric dentistry.

R 338.11523

Rule amended to clarify the licensure and examination content requirements for a specialty license in endodontics.

R 338.11525

Rule amended to revise the requirements for how a general practice dentist or specialty dentist holds themselves out to the public.

R 338.11527

Rule amended to clarify the affect a dental license suspension or revocation has on a specialty license.

R 338.11601

Rule on general anesthesia conditions amended to make a technical correction.

R 338.11602

Rule on intravenous conscious sedation conditions amended to make a technical correction.

R 338.11603

Rule on the adoption of standards amended to make a technical correction.

R 338.11604

Rule on reporting requirements amended to make a technical correction.

R 338.11605

Rule on course and instructor approval for enteral sedation amended to make a technical correction.

R 338.11701

Rule on renewal of a dentist license amended to make a technical correction.

R 338.11703

Rule on acceptable continuing education for dentists amended to update requirements.

R 338.11704

Rule on license renewal for registered dental hygienists and registered dental assistants amended to update requirements.

R 338.11704a

Rule on acceptable continuing education for registered dental hygienists and registered dental assistants amended to update requirements.

R 338.11704b

New rule that provides the requirements for dentist relicensure.

R 338.11704c

New rule that provides the requirements for dental hygienist and dental assistant relicensure.

R 338.11705

Rule on standards and requirements updated to reflect current information.

Michigan Board of Dietetics and Nutrition

The Michigan Board of Dietetics and Nutrition was created with the passage of Public Act 333 of 2006 with an effective date of July 1, 2007 which amended the Public Health Code, Public Act 368 of 1978, as amended.

The practice of dietetics and nutrition means the provision of dietetics and nutrition care service including assessing the nutrition needs, establishing priorities, goals and objectives to meet the nutrition needs of an individual or group of individuals, providing nutrition counseling, developing, implementing and managing a nutrition care system, evaluation and maintaining a standard of quality in dietetics and nutrition care services, and providing medical nutrition therapy.

The Michigan Board of Dietetics and Nutrition consists of 7 voting members: 5 licensed dietitians or nutritionists and 2 public members.

Board Members	Term Expires
Mikus, Eileen, Chair (until 6/2011) Pellston	6/30/11
Prout, William, Public Member, Chair (as of 11/2011) Mt. Pleasant (Vice Chair until 11/2011)	6/30/15
Weatherspoon, Lorraine, Ph.D., Vice Chair (as of 11/2011) Williamston	6/30/15
Christoph, Carl, Public Member Farmington Hills	6/30/11
Magnuson, Eugene, Public Member Muskegon	6/30/11
Mowafy, Mohey, Ph.D. Marquette	6/30/11
Newton, Coco, M.Ph., Vice Chair (until 9/10) Ann Arbor	6/30/15

The following appointments were made on 7/25/11:

Brogan, Kathryn, L.D., L.N., Ph.D. Detroit (replaced Mowafy)	6/30/15
Doak Whitney, Louise, R.D., M.S. East Lansing (replaced Christoph)	6/30/15
Jay, Ann, L.D., L.N. Pinconning (replaced Mikus)	6/30/15
Wille, Celina, Ph.D., Public Member East Lansing (replaced Magnuson)	6/30/15

**Schedule of Board Meetings
 Fiscal Year 2010/2011**

- November 5, 2010
- January 28, 2011 (cancelled)
- March 25, 2011 (cancelled)
- May 13, 2011 (cancelled)
- July 22, 2011 (cancelled)
- September 23, 2011

Licensing Activity

The Board is developing administrative rules to implement the licensing program so no licenses can be issued until the rules are officially filed.

Michigan Board of Marriage and Family Therapy

The Michigan Board of Marriage Counselors was originally formed with the enactment of Public Act 292 of 1966. On October 21, 1980, the authority of the Board was transferred to Article 15 of Public Act 299 of 1980. Public Act 126 of 1995 transferred the authority of the Board to the Public Health Code, Public Act 368 of 1978, as amended, and the name was changed to the Board of Marriage and Family Therapy.

Part 169 defines the practice of marriage and family therapy as the providing of guidance, testing, discussions, therapy, instruction, or advice that is intended to avoid, eliminate, relieve, manage or resolve marital or family conflict or discord, to create, improve, or restore marital or family harmony, or to prepare couples for marriage.

The Michigan Board of Marriage and Family Therapy consists of 9 voting members: 6 marriage and family therapists and 3 public members.

Board Members	Term Expires
Edelson, Lori K., M.S.W., L.M.F.T., Chair West Bloomfield	6/30/11
Angera, Jeffrey, L.M.F.T., Vice Chair Mt. Pleasant	6/30/14
Beckerson, Brett, Public Member Dearborn Heights	6/30/12
Harp, Sama, Public Member Dearborn Heights	6/30/13
Moriarty, James J., Ph.D. Bloomfield Hills	6/30/12
Royer, Marcia, L.M.F.T. Alma	6/30/11
Taylor, Anita, M.A., L.L.P. Bloomfield Hills	6/30/13
Warsh, Deborah U., L.M.F.T. Bloomfield Hills	6/30/11
Watson, Shawntain, Public Member Muskegon	6/30/11

The following appointments were made on 8/17/11:

Allen, Concha, Public Member Dewitt (replaced Watson)	6/30/15
Jager, Kathleen, Ph.D., L.M.F.T. East Lansing (replaced Royer)	6/30/15
Pernice-Duca, Francesca Novi (replaced Warsh)	6/30/15
Wampler, Richard, M.S.W., Ph.D. Haslett (replaced Edelson)	6/30/15

**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 29, 2010
March 8, 2011 (cancelled)
June 10, 2011 (DSC only)
August 26, 2011 (cancelled)

Licensing Activity

Marriage and Family Therapists

Applications Received	35
Examinations Authorized	38
Number of Licensees	693

Educational Limited MFT's

Applications Received	31
Number of Licensees	100

Regulatory Activity

Allegations Received	6
Administrative Investigations	10
Field Investigations Authorized	5
Field Investigations Completed	7
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0

Michigan Board of Massage Therapy

The Michigan Board of Massage Therapy was created with the enactment of Public Act 471 of 2009, which amended the Public Health Code, Public Act 368 of 1978.

The practice of massage therapy, as defined in the Public Health Code, means the application of a system of structured touch, pressure, movement, and holding to the soft tissue of the human body in which the primary intent is to enhance or restore the health and well-being of the client. Practice of massage therapy includes complementary methods, including the external application of water, heat, cold, lubrication, salt scrubs, body wraps, or other topical preparations; and electromechanical devices that mimic or enhance the actions possible by the hands.

The Michigan Board of Massage Therapy consists of 11 voting members: 7 massage therapists and 4 public members.

Board Members	Term Expires
Armstrong, Karen, Chair Farmington Hills	12/31/12
Ryan, Michael, Vice Chair (until 3/2011) Marquette	12/31/13
Joda-Miller, Bilky, Vice Chair (as of 3/2011) Lansing	12/31/13
Bograkos, Timothy, Public Member Lansing	12/31/12
Ericson, Mary Plymouth	12/31/11
Hartung, Tiffany, Public Member Warren	12/31/11
Hilton-Scheffler, Dennis Mt. Clemens	12/31/11
Kubizna, Jodi Grand Rapids	12/31/12
Mackowiak, Thomas, Public Member Lansing	12/31/12
Rudnianin, Harold Hancock	12/31/13
West, Amanda, Public Member Holt	12/31/13

**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 26, 2010
November 15, 2010
December 7, 2010
January 10, 2011 (cancelled)
March 14, 2011
May 9, 2011 (cancelled)
July 7, 2011 (cancelled)
September 12, 2011 (cancelled)

Licensing Activity

The Board is developing administrative rules to implement the licensing program so no licenses can be issued until the rules are officially filed.

Michigan Board of Medicine

The Michigan Board of Medicine was originally formed with the enactment of Public Act 237 of 1899. This act provided for the examination, regulation, licensing and registration of physicians and surgeons in the State of Michigan, and for the discipline of offenders against the Act. On January 8, 1974, a new Medical Practice Act, Public Act 185 of 1973, became effective. This Act continued in effect until September 30, 1978, when the Board's authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of medicine, as defined in the Public Health Code, means the diagnosis, treatment, prevention, cure or relieving of a human disease, ailment, defect, complaint, or other physical or mental condition, by attendance, advice, device, diagnostic test, or other means, or offering, undertaking, attempting to do, or holding oneself out as able to do, any of these acts.

The Michigan Board of Medicine consists of 19 voting members: 10 medical doctors, 1 physician's assistant, and 8 public members.

Board Members	Term Expires
Shade, George H., M.D., Chair Farmington Hills	12/31/11
Alghanem, Abd A., M.D., Vice Chair (until 1/2011) Flint	12/31/11
Ahmad, Busharat, M.D., Vice Chair (as of 1/2011) Monroe	12/31/11
Burney, Richard E., M.D. Ann Arbor	12/31/11
Cameron, Oliver G., M.D., Ph.D. Ann Arbor	12/31/13
Dull, David L., M.D. Ada	12/31/13
Fenn, William, P.A-C, Ph.D. Kalamazoo	12/31/10
Fraley, Theresa L., Public Member Huntington Woods	12/31/13
Graham, Peter, M.D. East Lansing	12/31/13
Graham-Solomon, Cheryl, Public Member Rochester Hills	12/31/13
Gudipati, Rao V.C., M.D. Freeland	12/31/11
Larson, Lynn M., Public Member Traverse City	12/31/11
Leung, Vivian W., Public Member Okemos	12/31/13
Raines III, Frank, Public Member Farmington Hills	12/31/11
San Diego, Leticia J., Ph.D., Public Member Clinton Township	12/31/13

Smith-Tyge, Nathaniel, Public Member Allen Park	12/31/10
Thomashow, Suzanne Hugly, M.D., Ph.D. East Lansing	12/31/13
Weingarden, David S., M.D. Southfield	12/31/13

The following appointments were made on 3/10/11:

Frain, Jamie, Public Member Haslett (replaced Smith-Tyge)	12/31/14
Pasky, Cynthia, Public Member Grand Rapids (replaced Helmer)	12/31/13
Riley, Meghan, PA-C Caledonia (replaced Fenn)	12/31/14

Schedule of Board Meetings

Fiscal Year 2010/2011

November 17, 2010
January 26, 2011
March 16, 2011
May 18, 2011
July 20, 2011
September 21, 2011

Licensing Activity

Medical Doctors

Applications Received	1,659
Examinations Authorized	203
Number of Licensees	32,500

Medical Doctor – Limited

Applications Received	0
Number of Licensees	0

MD – Special Volunteers

Applications Received	2
Number of Licensees	29

Clinical Academic Doctors

Applications Received	28
Number of Licensees	58

Educational Limited Doctors

Applications Received	1,319
Number of Licensees	4,025

Random Continuing Education Audits

Audited	123
Complied	95

Renewal Continuing Education Audits

Audited	117
Complied	117

Regulatory Activity

Allegations Received	770
Administrative Investigations	907
Field Investigations Authorized	162
Field Investigations Completed	210
Administrative Complaints Filed	83
Summary Suspensions Filed	10
Cease and Desist Orders Issued	2
Order to Compel Issued	1

Board Disciplinary Actions

Reprimand	1
Probation	21
Fine	25
Voluntary Surrender	5
Limited License	15
Suspension	15
Revocation	1
Total Disciplinary Actions	83

Michigan Board of Nursing

The Michigan Board of Nursing was originally created with the enactment of the Nurse Practice Act, Public Act 319 of 1909; authority was transferred to the Nursing Practice Act of 1967 by Public Act 149 of 1967. On September 30, 1978, authority was again transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The Public Health Code establishes the Board of Nursing to consist of 23 members: 9 registered nurses (RNs), 1 nurse midwife, 1 nurse anesthetist, 1 nurse practitioner, 3 licensed practical nurses (LPNs), and 8 public members. Of the 9 registered nurses: 3 must have a master's degree with a major in nursing and be engaged in nursing education, 1 in less than a baccalaureate program; 1 in a baccalaureate or higher program and 1 in a licensed practical nurse program; 3 must have a baccalaureate degree in nursing and be engaged in nursing practice or nursing administration; and 3 must be non-baccalaureate registered nurses engaged in nursing practice or nursing administration. The 3 licensed practical nurses must have graduated from a state-approved program of practical nurse education.

During this fiscal year, the Board met to grant licenses, impose disciplinary sanctions, review and approve nurse education programs, and to carry out all other mandates of the Code relating to the licensing and regulating of RNs and LPNs.

Board Member	Term Expires
Taft, Linda S., R.N., Chair (until 6/2011) Clinton Township	6/30/11
Lavery, Kathleen, R.N., M.S., C.N.M. (as of 9/2011) Jackson	6/30/13
Thompson, Teresa, RN, Vice Chair Farmington Hills	6/30/15
Allen, Regina D., Public Member Lansing	6/30/11
Armstrong, Reginald, Public Member Detroit	6/30/14
Auty, Earl, R.N., C.R.N.A., M.S. Grosse Pointe Park	6/30/13
Bowman, Karen A., R.N., N.P. Lansing	6/30/13
Breslin, Jeffrey H., R.N. Dansville	6/30/11
Brown, Mary J., R.N. Dimondale	6/30/15
Bugbee, Nina A., R.N. Flushing	6/30/13
Childress, James H., Public Member Grand Rapids	6/30/14
Clark, Margherita, R.N., M.S.N. St. Johns	6/30/11
Daley, Melynda J., L.P.N. Marquette	6/30/12

DeFoe, Jody, Public Member Lansing	6/30/11
Egede-Nissen, Lars, Public Member Okemos	6/30/14
Ferency, Michael, Public Member St. Johns	6/30/14
Johnson, Michelle M., R.N., M.S.N. Marquette	6/30/12
Lewis, Brenda, L.P.N. Chase	6/30/11
McMillan, Brigid, L.P.N. Grosse Pointe Park	6/30/13
Perry, Amy M., R.N., M.S.N. Ann Arbor	6/30/13
Schultz, LaDonna, Public Member West Branch	6/30/14
Stubbs, Donica, R.N., B.S.N. Inkster	6/30/12
Vacant, Public Member	

The following appointments were made on 7/25/11:

Bouchard-Wyant, Kathy, R.N., B.A. East Lansing (replaced Taft)	6/30/15
Cohen, Leah C., R.N. Dimondale (replaced Clark)	6/30/15
Corrado, Mary, Public Member Canton (replaced DeFoe)	6/30/15

The following appointments were made on 9/1/11:

Argyle, Roselyn D. Hemlock (replaced Breslin)	6/30/15
Basso, Ronald, Public Member Iron River (replaced Allen)	6/30/15
Stefanski, Elaine M. Hazel Park (replaced Lewis)	6/30/15

Schedule of Board Meetings
Fiscal Year 2010/2011

October 6, 2010 (DSC cancelled)
November 3, 2010 (DSC)
November 4, 2010 (Board)
December 1, 2010 (DSC)
January 5, 2011 (DSC)
January 6, 2011 (Board)
February 2, 2011 (DSC cancelled)
March 2, 2011 (DSC)
March 3, 2011 (Board)
April 6, 2011 (DSC)
May 4, 2011 (DSC)
May 5, 2011 (Board)
June 1, 2011 (DSC)
June 2, 2011 (Board)
July 6, 2011 (DSC cancelled)
August 3, 2011 (DSC)
September 7, 2011 (DSC)
September 8, 2011 (Board)

Licensing Activity

Registered Nurses

Applications Received	7,338
Examinations Authorized	6,145
Number of Licensees	135,298

Registered Nurses – Provisional

Applications Received	136
Examinations Authorized	
Number of Licensees	55

Register Nurses – Temporary

Applications Received	33
Numbers of Licensees	20

R.N. Specialty Certifications

Anesthetists

Applications Received	135
Number of Certifications	2,463

Midwives

Applications Received	15
Number of Licensees	324

Practitioners

Applications Received	388
Number of Licensees	4,194

Practical Nurses

Applications Received	2,183
Examinations Authorized	1,929
Number of Licensees	27,449

Random Continuing Education Audits

Practical Nurses

Audited	108
Complied	66

Registered Nurses

Audited	295
Complied	249

Nurse Anesthetists

Audited	52
Complied	48

Nurse Midwives

Audited	7
Complied	7

Nurse Practitioners

Audited	77
Complied	75

Renewal Continuing Education Audits

Practical Nurses

Audited	108
Complied	108

Registered Nurses

Audited	483
Complied	483

Registered Nurses w/Specialties

Audited	129
Complied	129

Regulatory Activity

Allegations Received	1,203
Administrative Investigations	1,669
Field Investigations Authorized	306
Field Investigations Completed	330
Administrative Complaints Filed	328
Summary Suspensions Filed	55
Cease and Desist Orders Issued	0
Order to Compel Issued	4

Board Disciplinary Actions

Reprimand	13
Probation	167
Fine	8
Voluntary Surrender	16
Limited License	6
Suspension	131
Revocation	4
Total Disciplinary Actions	344

Michigan Board of Nursing Home Administrators

The Michigan Board of Nursing Home Administrators was created by Public Act 166 of 1969. On October 21, 1980, the authority of the Board was transferred to Article 19 of Public Act 299 of 1980. Public Act 139 of 2001 transferred the authority of the Board of Nursing Home Administrators to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of a nursing home administrator, as defined in the Public Health Code, means planning, organizing, directing, and controlling the total operation of the nursing home on behalf of the governing board or owner of a nursing home.

The Michigan Board of Nursing Home Administrators consists of 9 voting members: 6 nursing home administrators and 3 public members.

Board Members	Term Expires
Clarkson, Gail J., N.H.A., Chair Bloomfield Hills	6/30/12
Ditri, Pam, N.H.A., Vice Chair Dansville	6/30/15
Breuker, Hermina, N.H.A. Twin Lake	6/30/13
Cook, Todd, Public Member Lansing	6/30/14
Ensign, Thomas, N.H.A. Clinton Township	6/30/13
Fazio, Sara, Public Member Grand Rapids	6/30/14
Moon, Valaria Conerly, Public Member Flint	6/30/12
Pettis, Susan E., N.H.A. Ann Arbor	6/30/12

The following appointment was made on 9/7/11:

Smith, Jeanne, N.H.A. Lake Orion (replaced Messick)	6/30/14
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**Schedule of Board Meetings
Fiscal Year 2010/2011**

November 16, 2010 (cancelled)
March 15, 2011
June 21, 2011
September 20, 2011 (cancelled)

Licensing Activity

Applications Received	160
Examinations Authorized	265
Number of Licensees	1,260

Random Continuing Education Audits

Audited	13
Complied	11

Renewal Continuing Education Audits

Audited	3
Complied	3

Regulatory Activity

Allegations Received	121
Administrative Investigations	21
Field Investigations Authorized	29
Field Investigations Completed	29
Administrative Complaints Filed	2
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	6
Fine	1
Voluntary Surrender	2
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	9

Michigan Board of Occupational Therapists

Public Act 473 of 1988 amended the Public Health Code, Public Act 368 of 1978, creating the Michigan Board of Occupational Therapists and the registration program for Occupational Therapists in Michigan. Public Act 523 of 2008 which was effective on January 13, 2009 changed the regulation of occupational therapists from registration to licensure.

The practice of Occupational Therapy, as defined in the Public Health Code, means the provision of services provided to promote health and wellness, prevent disability, preserve functional capabilities, prevent barriers, and enable or improve performance in everyday activities.

The Michigan Board of Occupational Therapists consists of 9 voting members: 5 occupational therapists and 4 public members, one of whom shall be a physician licensed under Part 170 or 175.

Board Members	Term Expires
Conti, Gerry E., O.T.R., Ph.D., Chair (until 2/2011) Ypsilanti	12/31/13
Andert, Diane K., O.T.R., Chair (as of 2/2011) Battle Creek	12/31/13
Sisco, William M., O.T.R., M.A., M.S., Vice Chair (until 2/2011) Holt, Vice Chair (until 2/2011)	12/31/13
Robosan-Burt, Susan, O.T.R., Vice Chair (as of 2/2011) Troy	12/31/13
Clipper, Christie, Public Member Taylor	12/31/13
Lenfield, Britt, O.T.R. Ada	12/31/10
Miller, John D., Public Member Canton	12/31/11
Polk, LoRon, Public Member Canton	12/31/13
Smith, Grace, Public Member Rockford	12/31/13

Schedule of Board Meetings

Fiscal Year 2010/2011

November 30, 2010

February 15, 2011 (Board only)

May 17, 2011 (DSC only)

August 16, 2011 (cancelled)

Registration Activity

Occupational Therapists

Applications Received	261
Number of Registrants	4,824

Occupational Therapy Assistants

Applications Received	142
Number of Registrants	1,450

Regulatory Activity

Allegations Received	13
Administrative Investigations	15
Field Investigations Authorized	5
Field Investigations Completed	2
Administrative Complaints Filed	2
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	1
Probation	1
Fine	1
Voluntary Surrender	0
Limited License	1
Suspension	3
Revocation	2
Total Disciplinary Actions	9

Michigan Board of Optometry

The Michigan Board of Optometry was originally formed with the enactment of Public Act 71 of 1909. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of Optometry includes the employment of objective or subjective means, including diagnostic pharmaceutical agents for the examination of the human eye for the purpose of ascertaining a departure from the normal, measuring of powers of vision, and adapting lenses for the aid of those powers.

On March 26, 1984, the Governor signed Public Act 42, which allowed optometrists to be certified to administer topical oculardiagnostic pharmaceutical agents to the anterior segment of the human eye. Rules allowing the board to certify optometrists as diagnostic agents were promulgated on July 13, 1985.

The Board of Optometry consists of 9 voting members: 5 optometrists and 4 public members.

Board Members	Term Expires
Lakin, Donald W., O.D., Chair Clinton Township	6/30/12
McClintic, David C., O.D., Vice Chair Portage	6/30/12
Agnone, Peter, O.D. Grand Blanc	6/30/12
Curley, Harvey M., Public Member Eastpointe	6/30/11
Dansby, William, Public Member East Lansing	6/30/14
Motherwell, Winifred, Public Member Haslett	6/30/11
Patera, Gregory, O.D. Lake Odessa	6/30/14
Thompson, Stephen P., O.D. East Lansing	6/30/14
Zair, Kays T., Public Member West Bloomfield	6/30/14

Schedule of Board Meetings Fiscal Year 2010/2011

November 10, 2010 (Board only)
 February 23, 2011
 May 25, 2011
 August 24, 2011

Licensing Activity

Applications Received	64
Number of Licensees	1,626

Specialty Certifications

DPA Certification

Number of Certifications	1,550
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TPA Certification

Number of Certifications	1,518
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DPA & TPA Certification

Number of Certifications	30
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Random Continuing Education Audits

Audited	52
Complied	47

Renewal Continuing Education Audits

Audited	8
Complied	8

Regulatory Activity

Allegations Received	20
Administrative Investigations	30
Field Investigations Authorized	2
Field Investigations Completed	4
Administrative Complaints Filed	8
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	1
Probation	3
Fine	0
Voluntary Surrender	1
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	5

Michigan Board of Osteopathic Medicine and Surgery

The Michigan Board of Osteopathic Medicine and Surgery was originally formed with the enactment of Public Act 162 of 1903. This Act regulated the practice of osteopathic medicine and surgery in the State of Michigan; provided for the examination, licensing and registration of osteopathic physicians and surgeons; and provided for the discipline of offenders against the Act. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of osteopathic medicine and surgery, as defined in the Public Health Code, means a separate, complete, and independent school of medicine and surgery, utilizing full methods of diagnosis and treatment in physical and mental health and disease, including the presentation and administration of drugs and biologicals, operative surgery, obstetrics, radiological and other electromagnetic emissions, and placing special emphasis on the interrelationship of the musculoskeletal system to other body systems.

The Michigan Board of Osteopathic Medicine and Surgery consists of 11 voting members: 7 osteopathic physicians, 1 physician's assistant, and 3 public members.

Board Members	Term Expires
Acker, Steven A., D.O., Chair (until 6,2011) Ann Arbor	12/31/13
Kelly, Charles E., D.O., Vice Chair (until 6/2011) Ortonville	12/31/14
Dobritt, Dennis W., D.O., Vice Chair (as of 6/2011) Bloomfield Hills	12/31/14
Carney, Kathleen M., Public Member Brighton	12/31/12
Cunningham, William C., D.O. Grand Rapids	12/31/14
Easton, Gale E., P.A.-C Jackson	12/31/11
Granowicz, Vincent J., D.O. Waterford	12/31/10
Kane, Barry, Public Member Grand Rapids	12/31/13
Lindberg, Paulette J., Public Member Marquette	12/31/11
Mustonen, Sylvia G., D.O. Okemos	12/31/10
Vanator, Douglas P., D.O. Olivet	12/31/12

The following appointments were made on 2/16/11:

McAndrews III, Peter D.O. Traverse City (replaced Granowicz)	12/31/14
Sevensma, Susan, D.O., F.A.O., D.M.E. Grand Rapids (replaced Mustonen)	12/31/14

**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 7, 2010
December 2, 2010
February 3, 2011 (cancelled)
April 7, 2011
June 7, 2011
August 4, 2011

Licensing Activity

Doctors of Osteopathic Medicine

Applications Received 391
Number of Licensees 6,904

Clinical Academic DO's

Applications Received 0
Number of Licensees 0

Educational Limited DO's

Applications Received 491
Number of Licensees 1,262

Special Volunteer DO's

Applications Received 0
Number of Licensees 1

Random Continuing Education Audits

Audited 96
Complied 86

Renewal Continuing Education Audits

Audited 29
Complied 29

Regulatory Activity

Allegations Received 235
Administrative Investigations 329
Field Investigations Authorized 55
Field Investigations Completed 51
Administrative Complaints Filed 31
Summary Suspensions Filed 4
Cease and Desist Orders Issued 1
Order to Compel Issued 0

Board Disciplinary Actions

Reprimand	0
Probation	8
Fine	7
Voluntary Surrender	2
Limited License	2
Suspension	6
Revocation	1
Total Disciplinary Actions	26

Michigan Board of Pharmacy

The Michigan Board of Pharmacy was originally formed with the enactment of Public Act 134 of 1885. On March 28, 1963, the authority of the Board to regulate the practice of pharmacy and to prescribe its powers and duties; and to prescribe penalties for violations of the act, was transferred to Public Act 151 of 1962. On September 30, 1978, authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The Public Health Code, Public Act 368 of 1978, as amended, defines the practice of pharmacy as a health service, the clinical application of which includes the encouragement of safety and efficacy in the prescribing, dispensing, administering and use of drugs and related articles for the prevention of illness and the maintenance and management of health.

Professional functions associated with the practice of pharmacy include the interpretation and evaluation of prescriptions; drug product selection; compounding, dispensing, safe storage, and distribution of drugs and devices; maintenance of legally-required records; advising the prescriber and the patient as required regarding contents, therapeutic action, utilization, and possible adverse reactions and interactions of drugs.

The Public Health Code, by section 17722, grants authority to the Board of Pharmacy to regulate, control, and inspect the character and standards of pharmacy practice and of drugs manufactured, distributed, prescribed, dispensed, and administered or issued in this State and procure samples, and limit or prevent the sale of drugs that do not comply with this section's provisions; prescribe minimum criteria for the use of professional and technical equipment in reference to the compounding and dispensing of drugs; grant pharmacy licenses for each separate place of practice of a dispensing prescriber who meets requirements for drug control licensing; and grant licenses to manufacturer/wholesaler distributors of prescription drugs.

The Michigan Board of Pharmacy consists of 11 voting members: 6 pharmacists and 5 public members.

Board Members	Term Expires
Collins, Gwenesia, R.Ph., Chair (until 6/2011) Sterling Heights	6/30/11
Schmidt, Harvey E., R.Ph., Chair (as of 8/2011) Tecumseh	6/30/14
Farida, Suhair, R.Ph., Vice Chair (until 6/2011) West Bloomfield	6/30/11
Almaklani, Dhafer A., R.Ph., Vice Chair (as of 8/2011) Dearborn	6/30/13
Bach, David, PharmD West Bloomfield	6/30/11
Bufe-Wyett, Pamela L., Public Member Bloomfield Hills	6/30/13
Carlson, Dale, Public Member Ferndale	6/30/14
Cousens, Mark, Public Member West Bloomfield	6/30/14

Hartman-Abramson, Ilene, Ph.D., Public Member Novi	6/30/11
Senneker, Devin R., Public Member Comstock Park	6/30/14
Yousif-Fakhoury, Sara A., R.Ph. Troy	6/30/12

The following appointments were made on 7/16/11:

Harney, Patricia, Public Member Grand Haven (replaced Abramson)	6/30/15
Moy-Sandusky, Suit Hing Ann Arbor (replaced Bach)	6/30/15
Penny, Nichole L., R.Ph. Three Rivers (replaced Collins)	6/30/15
Smeelink, Patricia Ada (replaced Farida)	6/30/15

**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 13, 2010
December 8, 2010
February 9, 2011
April 13, 2011
June 8, 2011
August 10, 2011

Licensing Activity

Pharmacists

Applications Received	633
Examinations Authorized	
NAPLEX	478
MPJE	640
Number of Licensees	13,218

Educational Limited Pharmacists

Applications Received	500
Number of Licensees	1,475

Other Licenses

Applications Received	
New Pharmacies	236
Manufacturer/Wholesaler	257

Number of Licensees	
Pharmacy	3,179
Manufacturer/Wholesaler	1,197

Random Continuing Education Audits

Audited	180
Complied	157

Renewal Continuing Education Audits

Audited	66
Complied	66

Regulatory Activity

Allegations Received	259
Administrative Investigations	391
Field Investigations Authorized	123
Field Investigations Completed	103
Administrative Complaints Filed	90
Summary Suspensions Filed	13
Cease and Desist Orders Issued	4
Order to Compel Issued	1

Board Disciplinary Actions

Reprimand	9
Probation	20
Fine	31
Voluntary Surrender	6
Limited License	5
Suspension	20
Revocation	1
Total Disciplinary Actions	92

Pharmacy Inspections

New Store Apps	454
Transfer Apps	63
Relocation Apps	72
Licensing Apps	589
Probation/Monitoring	4
Random	96

Michigan Board of Physical Therapy

The Michigan Board of Physical Therapy was originally formed with the enactment of Public Act 164 of 1965. On September 30, 1978, authority was transferred to the Public Health Code by Public Act 368 of 1978, as amended.

The practice of physical therapy, as defined in the Public Health Code, means: "the evaluation of, education of, consultation with, or treatment of an individual by the employment of effective properties of physical measures and the use of therapeutic exercises and rehabilitative procedures, with or without assistive devices, for the purpose of preventing, correcting, or alleviating a physical or mental disability. It includes treatment planning, performance of tests and measurements, interpretation of referrals, initiation of referrals, instruction, consultative services, and supervision of personnel. Physical measures include massage, mobilization, heat, cold, air, light, water, electricity, and sound."

Public Act 55 of 2009 amended the Public Health Code to include the licensing of the physical therapist assistant. The physical therapist assistant is an individual with a health profession subfield license under this part who assists a physical therapist in physical therapy intervention. The practice of the physical therapist assistant is defined as the practice of physical therapy performed under the supervision of a physical therapist licensed under this part. Additionally, it modified the composition of the board to 11 voting members: 6 physical therapists, 1 physical therapist assistant and 4 public members.

Board Members	Term Expires
Perry, David W., P.T., Chair (until 1/2011) Grosse Pointe Woods	12/31/11
Marlan, Jill A., P.T., Vice Chair (until 1/2011) Mason, Chair (as of 1/2011)	12/31/13
May, Andrew G., P.T., Vice Chair (as of 1/2011) Lansing	12/31/13
Crockett, Mecha, Public Member Lansing	12/31/13
Goldenbogen, David, P.T. Saginaw	12/31/13
Handler, Sean, Public Member Boyne Falls	12/31/13
Kumar, Vijay, P.T., Ph.D. West Branch	12/31/12
Mostrom, Elizabeth, P.T., Ph.D. Grand Rapids	12/31/11
Smietana, Ginger, Public Member Paw Paw	12/31/13
Thomas-Pilarczyk, Linda, Public Member Parma	12/31/11

The following appointment was made on 6/3/11:

Simmons, Barbara, P.T.A. Battle Creek	12/31/14
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**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 19, 2010

January 18, 2011

April 19, 2011

July 19, 2011

Licensing Activity

Physical Therapists

Applications Received	380
Examinations Authorized	593
Number of Licensees	9,245

Physical Therapy Assistants

Applications Received	2,022
Number of Licensees	1,377

Physical Therapist Assistants -- Limited

Applications Received	94
Examinations Authorized	570
Number of Licensees	1,963

Regulatory Activity

Allegations Received	33
Administrative Investigations	47
Field Investigations Authorized	8
Field Investigations Completed	17
Administrative Complaints Filed	5
Summary Suspensions Filed	1
Cease and Desist Orders Issued	1
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	1
Fine	1
Voluntary Surrender	0
Limited License	0
Suspension	2
Revocation	1
Total Disciplinary Actions	5

Rule Changes

**Filed with the Office of the Great Seal/Secretary of State on November 29, 2010
Effective November 29, 2010**

R 338.7101

Rule rescinded. The rule defined terms used in the rule set. The definitions were updated and revised and recodified in new rule R 338.7121.

R 338.7102

Rule rescinded. The rule specified the information required in a prescription for physical therapy and the length of time a prescription is valid. The rule provisions were recodified in new rule R 338.7122.

R 338.7103

Rule rescinded. The rule specified the factors the Board may consider when assessing a fine for a violation of the Public Health Code. The rule provisions were recodified in new rule R 338.7123.

R 338.7104

Rule rescinded. The rule adopted by reference accreditation standards for physical therapy educational programs. The rule provisions were revised to update language and recodified in new rule R 338.7131.

R 338.7105

Rule rescinded. The rule specified the requirements for a physical therapist license. The rule provisions were revised to clarify the licensure requirements and recodified in new rule R 338.7132.

R 338.7107

Rule rescinded. The rule provided for the adoption of the national physical therapist examination and the Board's jurisprudence examination. The rule provisions were revised for clarity and recodified in new rule R 338.7133.

R 338.7107a

Rule rescinded. The rule specified the eligibility requirements to take the national physical therapist examination. The rule provisions were revised to clarify the eligibility requirements and recodified in new rule R 338.7134.

R 338.7107b

Rule rescinded. The rule specified the eligibility requirements for foreign-trained physical therapists to take the national physical therapist examination. The rule provisions were recodified in new rule R 338.7135.

R 338.7110

Rule rescinded. The rule specified requirements for a physical therapist license by endorsement. The rule provisions were revised to clarify the requirements for licensure by endorsement and recodified in new rule R 338.7136.

R 338.7111

Rule rescinded. The rule specified requirements for relicensure when a physical therapist license has lapsed. The rule provisions were revised to clarify the requirements for relicensure and recodified in new rule R 338.7137.

R 338.7112

Rule rescinded. The rule permitted a physical therapist to delegate physical therapy acts, tasks, functions or interventions to an unlicensed individual as specified in the rule. The rule provisions were revised and recodified in new rule R 338.7139.

R 338.7113

Rule rescinded. The rule specified the acts or omissions by a licensee that are considered prohibited conduct. The rule provisions were recodified in new rule R 338.7124.

R 338.7114

Rule rescinded. The rule required that a licensee maintain a record for each patient or client. The rule provisions were recodified in new rule R 338.7125.

R 338.7121

A new rule that lists definitions for terms used in the rules. The provisions of rescinded rule R 338.7101 were revised and recodified in this rule.

R 338.7122

A new rule specifying the information required in a prescription for physical therapy and the length of time a prescription is valid. The provisions of rescinded rule R 338.7102 were recodified in this rule.

R 338.7123

A new rule specifying the factors the Board may consider when assessing a fine for a violation of the Public Health Code. The provisions of rescinded rule R 338.7103 were recodified in this rule.

R 338.7124

A new rule specifying acts or omissions by a licensee that are considered prohibited conduct. The provisions of rescinded rule R 338.7113 were recodified in this rule.

R 338.7125

A new rule that requires a licensee to maintain a patient record for each patient or client. The provisions of rescinded rule R 338.7114 were recodified in this rule.

R 338.7131

A new rule that provides for the adoption by reference of accreditation standards for physical therapist educational programs. The provisions of rescinded rule R 338.7104 were revised to update language and recodified in this rule.

R 338.7132

A new rule specifying requirements for licensure as a physical therapist. The provisions of rescinded rule R 338.7105 were revised to clarify the licensure requirements and recodified in this rule.

R 338.7133

A new rule that provides for the adoption of the national physical therapist examination and the Board's jurisprudence examination. The provisions of rescinded rule R 338.7107 were revised for clarity and recodified in this rule.

R 338.7134

A new rule specifying eligibility requirements to take the national physical therapist examination. The provisions of rescinded rule R 338.7107a were revised to clarify the eligibility requirements and recodified in this rule. Also, a provision was added that will allow an applicant to take the national examination if he or she is enrolled in the final semester, quarter, or term of a board-approved educational program and is expected to graduate.

R 338.7135

A new rule specifying eligibility requirements for foreign-trained physical therapists to take the national physical therapist examination. The provisions of rescinded rule R 338.7107b were recodified in this rule.

R 338.7136

A new rule specifying requirements for a physical therapist license by endorsement. The provisions of rescinded rule R 338.7110 were revised to clarify the requirements for licensure by endorsement and recodified in this rule.

R 338.7137

A new rule specifying requirements for relicensure when a physical therapist license has lapsed. The provisions of rescinded rule R 338.7111 were revised to clarify the requirements for relicensure and recodified in this rule.

R 338.7138

A new rule establishing requirements for a physical therapist's supervision and delegation of physical therapy acts, tasks, functions or interventions to a physical therapist assistant.

R 338.7139

A new rule specifying requirements for a physical therapist's supervision and delegation of physical therapy acts, tasks, or functions to an unlicensed individual. The provisions of rescinded rule R 338.7112 were revised and recodified in this rule.

R 338.7141

A new rule that provides for the Board's adoption by reference of standards for accrediting physical therapist assistant educational programs.

R 338.7142

A new rule establishing requirements for licensure as a physical therapist assistant.

R 338.7143

A new rule that provides for a limited license as a physical therapist assistant and specifies the requirements for this license.

R 338.7144

A new rule specifying the implementation date for the physical therapist assistant licensing program.

R 338.7145

A new rule that provides for the adoption of the national physical therapist assistant examination and the Board's jurisprudence examination.

R 338.7146

A new rule establishing eligibility requirements to take the national physical therapist assistant examination.

R 338.7147

A new rule establishing licensure requirements for foreign-trained physical therapist assistants.

R 338.7148

A new rule establishing requirements to obtain a physical therapist assistant license by endorsement.

R 338.7149

A new rule establishing requirements for relicensure when a physical therapist assistant license has lapsed.

R 338.7150

A new rule that permits a physical therapist assistant to delegate physical therapy acts, tasks or functions to an unlicensed individual as specified in the rule.

Michigan Joint Task Force on Physician's Assistants

The Committee on Physician's Assistants was formed with the enactment of Public Act 420 of 1976, signed by the Governor on January 9, 1977. The Act regulated the practice of physician's assistants in the State of Michigan, providing a system to determine and approve the qualifications of physician's assistants, creating a committee on physician's assistants, prescribing its powers and duties, and prescribing penalties. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended and became the Joint Task Force on Physician's Assistants.

The practice of a physician's assistant, as defined in the Public Health Code, means the practice of allopathic or osteopathic medicine under the supervision of an allopathic or osteopathic physician or the practice of podiatric medicine under the supervision of a podiatrist.

The Joint Task Force on Physician's Assistants of 2009 consisted of 11 voting members: 5 physician's assistants, a physician representative of the Boards of Medicine, Osteopathic Medicine and Surgery and Podiatric Medicine and Surgery and 3 public members. In May 2010, Public Act 79 passed which increased the board composition to 13 members; 7 physician's assistants, the 3 physicians previously specified and 3 public members.

Task Force Members	Term Expires
O'Brien, Bernard J., P.A.-C, Chair Alpena	12/31/11
Davis, Michael A., P.A.-C, Vice Chair (until 4/2011) Harbor Beach	12/31/11
Acker, Steven A., D.O. Ann Arbor	12/31/13
Claussen, Michael, P.A.-C. Kalamazoo	6/30/14
Geller, Louis, D.P.M. Huntington Woods	12/31/13
Gnodtke, Pamela, Public Member Charlevoix	12/31/13
Hernandez, Rene L., P.A.-C Alma	12/31/11
Lepird, Sherry L., Public Member Portage	12/31/11
McGinty, John, P.A.-C Attica	12/31/11
Noth, Christopher, P.A.-C Grand Blanc	12/31/13
Siemaszko, Thomas, Public Member Brighton	12/31/11
Wagner, Karl G., Jr., P.A.-C New Hudson	12/31/11
Weingarden, David S., M.D. Southfield	12/31/11

**Schedule of Joint Task Force Meetings
Fiscal Year 2010/2011**

October 4, 2010 (Board only)
November 1, 2010
January 4, 2011 (cancelled)
April 5, 2011
July 5, 2011 (cancelled)

Licensing Activity

Applications Received	304
Number of Licensees	3,821

Physician's Assistant Temporary

Applications Received	6
Number of Licensees	7

Regulatory Activity

Allegations Received	64
Administrative Investigations	83
Field Investigations Authorized	15
Field Investigations Completed	5
Administrative Complaints Filed	5
Summary Suspensions Filed	2
Cease and Desist Orders Issued	0
Order to Compel Issued	1

Joint Task Force Disciplinary Actions

Reprimand	0
Probation	1
Fine	0
Voluntary Surrender	0
Limited License	2
Suspension	0
Revocation	1
Total Disciplinary Actions	4

Michigan Board of Podiatric Medicine and Surgery

The Michigan Board of Podiatric Medicine and Surgery was originally formed with the enactment of Public Act 115 of 1915. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of podiatric medicine and surgery, as defined in the Public Health Code, means the examination, diagnosis, and treatment of abnormal nails, superficial excrescences occurring on the human hands and feet, including corns, warts, callosities, and bunions, and arch troubles or the treatment medically, surgically, mechanically, or by physiotherapy of ailments of human feet or ankles as they affect the condition of the feet. It does not include amputation of human feet, or the use or administration of anesthetics other than local.

The Michigan Board of Podiatric Medicine and Surgery consists of 9 voting members: 5 podiatrists, 1 physician's assistant and 3 public members.

Board Members	Term Expires
Geller, Louis, D.P.M., Vice Chair (until 7/2011) Huntington Woods, Chair (as of 7/2011)	6/30/14
Lazar, Howard, D.P.M., Vice Chair (as of 7/2011) Bloomfield Hills	6/30/13
Blackledge, Christine, Public Member Traverse City	6/30/11
Gee, Lily, Public Member Haslett	6/30/13
Hughes, Scott, D.P.M. Monroe	6/30/14
Kezelian, Harry A., D.P.M. Bloomfield Hills	6/30/13
Morris, Charles, Public Member Wyandotte	6/30/14
Scott, Tara L., D.P.M. Southfield	6/30/11
Sher, Robert, Public Member West Bloomfield	6/30/14

The following appointments were made on 7/21/11:

Drozdowski, Shane, Public Member Lake Orion (replaced Blackledge)	6/30/15
Kreitman, Kevan, D.P.M. Birmingham (replaced Scott)	6/30/15

**Schedule of Board Meetings
 Fiscal Year 2010/2011**

October 27, 2010 (cancelled)
 January 19, 2011
 April 27, 2011
 July 27, 2011

Licensing Activity

Podiatrists

Applications Received	28
Examinations Authorized	32
Number of Licensees	772

Educational Limited Podiatrists

Applications Received	36
Number of Licensees	63

Podiatrist Educational Preceptorship

Applications Received	1
Number of Licensees	0

Random Continuing Education Audits

Audited	17
Complied	12

Renewal Continuing Education Audits

Audited	12
Complied	12

Regulatory Activity

Allegations Received	19
Administrative Investigations	46
Field Investigations Authorized	4
Field Investigations Completed	8
Administrative Complaints Filed	8
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	2
Fine	1
Voluntary Surrender	0
Limited License	1
Suspension	1
Revocation	0
Total Disciplinary Actions	5

Michigan Board of Psychology

The regulation of psychologists was initially started as a certification by the superintendent of public instruction under the provisions of Public Act 257 of 1959. On September 30, 1978, the certification process was transferred to the Public Health Code, Public Act 368 of 1978, as amended and the Board of Psychology was created.

The Public Health Code defines the practice of psychology as the rendering to individuals, groups, organizations, or the public of services involving the application of principles, methods, and procedures of understanding, predicting, and influencing behavior for the purposes of the diagnosis, assessment related to diagnosis, prevention, amelioration, or treatment of mental or emotional disorders, disabilities or behavioral adjustment problems by means of psychotherapy, counseling, behavior modification, hypnosis, biofeedback techniques, psychological tests, or other verbal or behavioral means. The practice of psychology does not include the practice of medicine such as prescribing drugs, performing surgery, or administering electro-convulsive therapy.

The Michigan Board of Psychology consists of 9 voting members: 5 psychologists, including at least 1 nondoctoral psychologist, and 4 public members.

Board Members	Term Expires
Ver Merris, Dane K., Ed.D., Chair Grand Rapids	12/31/12
Warbelow, Alan, L.L.P., Vice Chair Plymouth	12/31/11
Cowie, Julie, Public Member South Haven	12/31/11
Flores, Christopher J., Public Member Flint	12/31/10
Gualdoni, James A., Public Member Wolverine Lake	12/31/10
Hack, Robert, M.A., L.L.P. West Bloomfield	12/31/12
Navarro, Monica P., Public Member Lake Orion	12/31/13
Reed, James, Ph.D. Lansing	12/31/11
Toll, Roberta, Ph.D. Bloomfield Hills	12/31/11

The following appointments were made on 6/1/11:

Kayes, Dennis, Public Member Huntington Woods (replaced Gualdoni)	12/31/14
Swarts, Lori, Public Member Clare (replaced Flores)	12/31/14

**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 20, 2010
December 1, 2010 (DSC only)
February 17, 2011
April 21, 2011
June 16, 2011
July 29, 2011 (Board only)
August 18, 2011

Licensing Activity

Applications Received	522
Examinations Authorized	173
Number of Licensees	
Psychologists	2,909
Doctoral Limited	241
Masters Limited	3,579
Temporary Limited	434

Regulatory Activity

Allegations Received	81
Administrative Investigations	70
Field Investigations Authorized	18
Field Investigations Completed	30
Administrative Complaints Filed	20
Summary Suspensions Filed	1
Cease and Desist Orders Issued	2
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	2
Fine	3
Voluntary Surrender	0
Limited License	3
Suspension	4
Revocation	1
Total Disciplinary Actions	13

Michigan Board of Respiratory Care

The Michigan Board of Respiratory Care was created with the enactment of Public Act 3 of 2004, which amended the Public Health Code, Public Act 368 of 1978.

The practice of respiratory care, as defined in the Public Health Code, means the provision of respiratory care services which may be provided by an inpatient or outpatient service or department within a health facility, by a home care agency or durable medical equipment company, or by an educational program.

The Michigan Board of Respiratory Care in 2009 consisted of 4 respiratory therapists, 1 medical director and 2 public members. In May 2010, Public Act 79 passed which increased the board composition to 7 respiratory therapists, 1 medical director and 3 public members.

Board Members	Term Expires
Berry, James R., Jr., R.T., Chair (until 2/2011) Detroit	12/31/13
Haas, Carl, L.R.T., Vice Chair (until 2/2011) Ann Arbor, Cahir (as of 2/2011)	12/31/11
Rinck, John, L.R.T., Vice Chair (as of 2/2011) Eaton Rapids	12/31/13
Abramson, Ilene, Ph.D., Public Member Novi	12/31/12
Darin, John, L.R.T. Wyandotte	6/30/14
Kehr, Randall M., R.T. Grandville	12/31/12
Mutch, Kathleen, Public Member Novi	12/31/10
Prins, Julia, L.R.T. Rochester Hills	6/30/14
Sprague, Frank R., M.D. Muskegon	12/31/11

The following appointments were made on 7/27/11:

Hyka, John, L.R.T. Shelby Township	12/31/14
Monks, Patrick, Public Member Clinton Township (replaced Mutch)	12/31/14

**Schedule of Board Meetings
Fiscal Year 2010/2011**
November 12, 2010 (DSC only)
February 11, 2011
May 6, 2011
August 12, 2011 (Board only)

Licensing Activity

Respiratory Therapists

Applications Received	331
Number of Licensees	5,052

Respiratory Therapists Temporary

Applications Received	0
Number of Licensees	29

Regulatory Activity

Allegations Received	11
Administrative Investigations	16
Field Investigations Authorized	3
Field Investigations Completed	4
Administrative Complaints Filed	2
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Disciplinary Actions

Reprimand	0
Probation	1
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	2
Revocation	0
Total Disciplinary Actions	3

Sanitarian Registration

The Michigan Board of Sanitarians was originally formed with the enactment of Public Act 147 of 1963. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended. Executive Order No. 1996-2, effective May 15, 1996, transferred all statutory authority, powers, duties, functions and responsibilities of the Board of Sanitarians under Part 184 of the Public Health Code, being Sections 333.18401 *et seq.* of the Michigan Compiled Laws, from the Department of Commerce to the Director of the Department of Consumer & Industry Services by a Type III transfer as defined by Section 3 of Act No. 380 of the Public Acts of 1965, as amended, being Section 16.103 of the Michigan Compiled Laws. Effective January 1, 2004, Executive Order No. 2003-18 transferred, by a Type II transfer, any authority, powers, duties, functions and responsibilities for programs or functions within the Department of Consumer & Industry Services within the Bureau of Health Services to the Director of the Department of Community Health.

Public Act 308 of 2004, effective January 1, 2004, created a seven-member advisory committee whose purpose is to make recommendations to the Department relative to qualifications for registration, establishment of education and training standards and actions regarding disciplinary proceedings. Underlying all duties is the responsibility of the Department to promote and protect the public's health, safety, and welfare.

Sanitarian means an individual who has specialized education and experience in the physical, biological and sanitary sciences as applied to the educational, investigational and technical duties in the field of environmental health.

By Executive Order 2009-12, the Sanitarian Advisory Committee was abolished effective May 17, 2009. The registration of individuals continues unimpeded.

Registration Activity

Applications Received	4
Number of Registered Sanitarians	484

No Regulatory Activity

No Disciplinary Actions

Michigan Board of Social Work

The Michigan Board of Examiners of Social Workers was originally formed with Public Act 352 of 1972. On October 21, 1980, the authority of the Board was transferred to Article 16 of Public Act 299 of 1980. Public Act 11 of 2000 transferred the authority of the Board of Examiners of Social Workers to the Public Health Code, Public Act 368 of 1978, as amended. Public Act 61 of 2004 amended Public Act 368 of 1978 to provide for licensure of bachelor's and master's level social workers and for the registration of social service technicians.

The practice of social work at the bachelor's level, as applied within the scope of social work values, ethics, principles and skills, means the following: the application of social work theory, knowledge, methods and ethics; social work case management and casework; helping communities, organizations, individuals, or groups improve their social or health services by utilizing social work practice skills; and the administration of assessment checklists that do not require special training and that do not require interpretation.

The practice of social work at the master's level, as applied within the scope of social work values, ethics, principles and skills, means the following: advanced application of macro social work processes and systems; the advanced application of specialized clinical knowledge; and advanced clinical skills and the advanced application of the knowledge of human development and behavior and social, economic and cultural institutions.

The Michigan Board of Social Work consists of 9 voting members: 6 individuals engaged primarily in the practice of social work and 3 public members.

Board Members	Term Expires
Wojack, Matthew, L.M.S.W., Chair Lansing	12/31/13
Najor-Durack, Anwar, L.M.S.W., Vice Chair West Bloomfield	12/31/11
Battles, Merry, L.M.S.W. Kalamazoo	12/31/12
Bell, Heather Adams, Public Member Grand Rapids	12/31/12
Brock, Michelle, L.M.S.W. East Lansing	12/31/11
Hayes, E. Jane, L.M.S.W. Traverse City	12/31/13
Manela, Pamela, L.M.S.W. Novi	12/31/14
Munson, Dara, Public Member West Bloomfield	12/31/10
Woods, Michelle, Public Member Jackson	12/31/13

The following appointment was made on 2/11/11:

Blum, Eleanor, Public Member
Farmington Hills (replaced Munson)

12/31/14

Schedule of Board Meetings

Fiscal Year 2010/2011

November 23, 2010
January 25, 2011 (cancelled)
March 22, 2011
May 24, 2011
July 26, 2011 (Board only)
September 27, 2011

Licensing Activity

Master's Social Workers

Applications Received	786
Examinations Authorized	1930
Number of Licensees	14,285

Limited Master's Social Workers

Applications Received	1,016
Number of Licensees	3,937

MSW Specialty Certifications

Macro Specialty

Applications Received	13
Number of Certifications	11,939

Clinical Specialty

Applications Received	12
Number of Certifications	14,034

Bachelor's Social Workers

Applications Received	69
Examinations Authorized	285
Number of Licensees	4,632

Bachelor's Limited Social Workers

Applications Received	253
Number of Licensees	824

Social Service Technicians

Applications Received	93
Number of Registrants	1,592

Social Services Limited Technician

Applications Received	9
Number of Registrants	26

Random Continuing Education Audits

Audited	200
Complied	178

Renewal Continuing Education Audits

Audited	pending
Complied	pending

Regulatory Activity

Allegations Received	161
Administrative Investigations	233
Field Investigations Authorized	36
Field Investigations Completed	51
Administrative Complaints Filed	66
Summary Suspensions Filed	4
Cease and Desist Orders Issued	1
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	35
Fine	3
Voluntary Surrender	4
Limited License	4
Suspension	13
Revocation	1
Total Disciplinary Actions	60

Michigan Board of Speech-Language Pathology

The Michigan Board of Speech-Language Pathology was created with the enactment of Public Act 524 of 2009, which amended the Public Health Code, Public Act 368 of 1978.

The practice of speech-language pathology, as defined in the Public Health Code, means the application of principles, methods, and procedures related to the development of disorders of human communication.

The Michigan Board of Speech-Language Pathology consists of 11 voting members: 6 speech-language pathologists, 3 public members and 2 physicians, one of whom is a board-certified otolaryngologist.

Board Members	Term Expires
Weise, Timothy, CCC-SLP, Chair Grosse Ile	12/31/13
Strong, Katie, CCC-SLP, Vice Chair East Lansing	12/31/11
Austin, Brit, CCC-SLP Oxford	12/31/14
Brown-Clarke, Judith, Ph.D., Public Member Lansing	12/31/13
Eldis, Francis, CCC-A/SLP Redford	12/31/14
Fairbrother, Ellen, CCC-SLP Southfield	12/31/11
Gardner, Glendon, M.D. Bloomfield Hills	12/31/13
Koepke, Thomas, Ph.D., Public Member Novi	12/31/12
Meyer, Jeanette, M.D. Kalamazoo	12/31/12
Riccio-Omichinski, Donna, Public Member Ann Arbor	12/31/11
Stevens, Lizbeth, CCC-SLP Berkley	12/31/12

The following appointment was made on 4/1/11:

Divi, Vasu, M.D. Ann Arbor (replaced Gardner)	12/31/13
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**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 11, 2010
November 8, 2010
December 6, 2010 (cancelled)
January 20, 2011 (cancelled)
March 28, 2011 (cancelled)
May 19, 2011
July 18, 2011
September 22, 2011

Licensing Activity

The Board is developing administrative rules to implement the licensing program so no licenses can be issued until the rules are officially filed.

Michigan Board of Veterinary Medicine

The Michigan Board of Veterinary Medicine was originally formed with the enactment of Public Act 152 of 1956. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of veterinary medicine, as defined in the Public Health Code, means prescribing or administering a drug, medicine, treatment or method of procedure; performing an operation or manipulation; applying an apparatus or appliance; or giving an instruction or demonstration designed to alter an animal from its normal condition; curing, ameliorating, correcting, reducing, or modifying a disease, deformity, defect, wound, or injury in or to an animal; diagnosing or prognosing, or both, a disease, deformity or defect in an animal by a test, procedure, manipulation, technique, autopsy, biopsy, or other examination.

The Michigan Board of Veterinary Medicine consists of 9 voting members: 5 veterinarians, 1 veterinary technician, and 3 public members.

Board Members	Term Expires
Vaupel, Henry, D.V.M., Chair (until 12/2010) Fowlerville	12/31/10
Letsche, Lawrence A., D.V.M., Vice Chair (until 4/2011) Plymouth, Chair (as of 4/2011)	12/31/13
Rohwer, Christopher, D.V.M., Vice Chair (as of 4/2011) Kalamazoo	12/31/14
Allen, Carlene, Public Member Frederic	12/31/13
Beattie, Kimlee, Public Member East Lansing	12/31/13
Kopcha, Michelle, D.V.M. Haslett	12/31/10
McMahon-Pelton, Sandra, L.V.T. Westland	12/31/12
Postorino-Reeves, Nancy, D.V.M. East Lansing	12/31/12
Stitt, Amanda, Public Member Lansing	12/31/11

The following appointments were made on 3/23/11:

Kim, Charlotte, D.V.M. Canton (replaced Kopcha)	12/31/14
Thorp-Stout, Colleen, D.V.M. Brutus (replaced Vaupel)	12/31/14

**Schedule of Board Meetings
Fiscal Year 2010/2011**

October 28, 2010 (Board only)
December 14, 2010 (DSC only)
February 24, 2011 (cancelled)
April 28, 2011
June 23, 2011 (cancelled)
August 25, 2011 (Board only)

Licensing Activity

Veterinarians

Applications Received	175
Number of Licensees	3,805

Clinical Academic Veterinarians

Applications Received	12
Number of Licensees	75

Educational Limited Veterinarians

Applications Received	1
Number of Licensees	3

Veterinary Technicians

Applications Received	207
Examinations Administered	220
Number of Licensees	2,522

Regulatory Activity

Allegations Received	59
Administrative Investigations	119
Field Investigations Authorized	26
Field Investigations Completed	19
Administrative Complaints Filed	15
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	1
Fine	3
Voluntary Surrender	0
Limited License	0
Suspension	1
Revocation	0
Total Disciplinary Actions	5

Rule Changes

Filed with the Office of the Great Seal/Secretary of State on February 23, 2011 and effective on February 23, 2011

Veterinary Medicine – General Rules

R 338.4901

Rule amended to include revised definitions for terms used in the rule set.

R 338.4902

Rule amended to update and clarify licensure by examination requirements.

R 338.4903

Rule amended to adopt the North American Veterinary Licensing Examination developed by the National Board of Veterinary Medical Examiners.

R 338.4906

Rule amended to update and clarify veterinary licensure by endorsement requirements.

R 338.4908

Rule amended to provide for board approval and adoption by reference of the standards for accrediting colleges of veterinary medicine.

R 338.4911

Rule amended to reflect a technical correction.

R 338.4914a

Rule amended to update and clarify the requirements for applicants applying for educational limited licenses.

R 338.4915

Rule amended to update and clarify the requirements for relicensure.

R 338.4918

Rule amended to reflect a technical correction in the assessment of fines.

R 338.4921

New rule added to specify the requirements for maintaining the medical records of patients.

R 338.4922

New rule added to specify whether or not a veterinarian-client-patient relationship exists.

R 338.4923

New rule added to establish protocols for dispensing or prescribing a prescription product.

R 338.4924

New rule added to clarify procedures for terminating a veterinarian-client-patient relationship.

Veterinary Technician Licensure

R 338.4971

Rule amended to include revised definitions for terms used in the rule set.

R 338.4972

Rule amended to update and clarify licensure by examination requirements.

R 338.4973

Examination eligibility rule amended to require submission of a license application and fee not less than 45 days before the date of the examination.

R 338.4976

Rule amended to update and clarify licensure by endorsement requirements.

R 338.4978

Rule amended to provide for board approval and adoption by reference of the standards for veterinary technician training programs.

R 338.4982

Rule amended to update and clarify the requirements for relicensure.

Michigan Medical Marihuana Registry

The Michigan Medical Marihuana Registry was created with the passage of Initiated Law 1 of 2008 by the people of Michigan in November 2008. The Act is intended to allow the medical use of marihuana; to provide protections for the medical use of marihuana; to provide for a system of registry identification cards for qualifying patients and primary caregivers; to impose a fee for registry application and renewal; to provide for the promulgation of rules; to provide for affirmative defenses; and to provide for penalties for violations of the act.

Although federal law currently prohibits any use of marihuana except under very limited circumstances, states are not required to enforce federal law or prosecute people for engaging in activities prohibited by federal law. The passage of this law creates a setting where citizens are not penalized for the medical use and cultivation of marihuana if authorized to do so by the state of Michigan.

The registry was implemented on April 6, 2009. Individuals can apply to be registered as a patient and a patient can indicate that a specific individual will assist as a caregiver for them. A registered patient can cultivate 12 plants and possess 2.5 ounces of marihuana. A designated caregiver can cultivate 12 plants on behalf of a patient if so authorized. Only one person – the patient or the caregiver on behalf of the patient can grow the 12 allotted plants. A caregiver can be designated to assist up to 5 patients.

The application process consists of submitting a fee and a form with basic information regarding name, address, identification information and designation of who controls the marihuana plants – the patient or caregiver. In addition to the application, the patient must also provide documentation from a fully licensed Michigan physician with whom they have a bona fide relationship certifying they have one or more of the debilitating conditions specified in the law. The physician attests that the use of medical marihuana may be beneficial to the patient. The physician does not write or provide a prescription for the medical marihuana. Marihuana is not dispensed through a pharmacy.

As of September 30, 2011, the registry program had received 189,798 applications since the onset of the program in April 2009. There were 156,723 patient cards issued and 63,738 patients who have designated caregivers approved (this is not the total number of caregivers registered in the state of Michigan as one caregiver can receive multiple cards—one for each qualifying patient to whom the caregiver is connected). Specifically for fiscal year 2010-11, the registry program received 126,115 new and renewal applications. During fiscal year 2010-2011 there were 118,659 patient registry cards issued and 47,750 patients with designated caregivers.

Of significant note, 16,021 new and renewal applications were received in March 2011. One one day alone, over 1,600 new and renewal applications were received. April, May and June 2011 all followed with the Registry Program receiving over 11,000 new and renewal applications each of those months.

The registry program is cycling through the second renewal process. All registered qualifying patients are required to renew annually. The renewal process requires an application, a new physician certification form, an attestation from the designated caregiver (if applicable), the req-

uisite fee and copies of photo identification. The renewal is valid for one year, just as the original application. New registry identification cards are issued to the qualifying patient and the designated caregiver.

In May 2010 the Medical Marihuana Registry Program purchased two specialty card printers to print the medical marihuana registry cards. The purchase of these printers significantly increased the number of patient and caregiver registry identification cards that could be printed, enabling the Registry Program to print up to 800 cards per day. This output allowed the Registry Program to eliminate the backlog of card issuance for a brief period of time. Due to the increased volume of new and renewal applications, the new card printers were unable to keep up with the required number of cards to print. As a result, at the end of the fiscal year the Registry Program was again dealing with a significant backlog of issuing registry cards. Discussions were taking place at the end of the fiscal year on methods to alleviate the backlog.

In Fiscal year 2010-2011, 7,952 new and renewal applications were denied. Common reasons for the denial of applications are incomplete information provided, incomplete documentation was submitted, or an insufficient fee (without proper supporting documentation) was submitted.

The table below identifies the frequency the debilitating conditions have been indicated on the patient applications.

Debilitating Condition	Number of Patients	
	Original 1/1/10 – 12/31/10	Renewals 1/1/10 – 12/31/10
AIDS	61	1
Alzheimers	2	
Amyotrophic Lateral Sclerosis	10	
Cachexia	133	3
Cancer	371	6
Crohn’s Disease	127	3
Glaucoma	153	1
Hepatitis C	213	7
HIV	72	1
Nail Patella	7	
Seizures – Epilepsy	229	2
Severe and Chronic Pain	9,967	73
Severe and Persistent Muscle Spasms	3,490	26
Severe Nausea	1,294	18
Wasting Syndrome	123	3
Total # patients	10,798	87

No patient or primary caregiver registrations were revoked in Fiscal Year 2010-2011.

In Fiscal Year 2010-2011, 504 licensed medical doctors or doctors of osteopathy and surgery certified patients for the Medical Marihuana Registry Program.

Additional information regarding this program can be located at www.michigan.gov/mmp.

Health Professional Recovery Committee

The Health Professional Recovery Committee (HPRC) was created by Public Act 80 of 1993, which became effective April 1, 1994. Section 333.16167 describes the Committee's duties as follows:

Sec. 16167. The committee shall do all of the following:

(a) Establish the general components of the health professional recovery program and a mechanism for monitoring health professionals who may be impaired.

(b) Subject to sections 16169 and 16170 and in conjunction with the health professional recovery program consultants described in section 16168, develop and implement criteria for the identification, assessment, and treatment of health professionals who may be impaired.

(c) In conjunction with the health professional recovery program consultants described in section 16168, develop and implement mechanisms for the evaluation of continuing care or aftercare plans for health professionals who may be impaired.

(d) Develop a mechanism and criteria for the referral of a health professional who may be impaired to a professional association when appropriate for the purpose of providing assistance to the health professional. In developing criteria under this subdivision, the committee shall require that a referral be made only with the consent of the health professional.

(e) Annually report to each board and the physician's assistants task force created under this article on the status of the health professional recovery program. The committee shall include in the report, at a minimum, statistical information on the level of participation in the program of each health profession. The committee may include in the report recommendations for changes in the health professional recovery program and for participation by the boards and the physician's assistants task force, professional associations, substance abuse treatment and prevention programs, and other appropriate agencies.

The health profession boards and the designee of Licensing and Regulatory Affairs appoint members in accordance with Section 16165 of the Michigan Public Health Code.

Member Appointed By	Term Expires
Christensen, Carl, M.D., Ph.D., Chair (as of 3/2010) Board of Medicine	12/31/11
Kelley, Bobbe J., D.O. Board of Osteopathic Medicine & Surgery	12/31/10
Bender, Dean A., M.A., D.C. Board of Chiropractic	12/31/10
Berkman, Arnold S., PhD Board of Psychology	12/31/11
Burke, Michael Public Member	12/31/11
Creighton, Nancy, LMFT Board of Marriage & Family Therapy	12/31/11
Dimo, Mary E., PharmD Board of Pharmacy	12/31/11
Foley, Mary K., R.N. Board of Nursing	12/31/10

Hamick, Steven K., R.R.T. Board of Respiratory Care	12/31/12
Kronquist, Mary P., M.M. Public Member	12/31/10
Lewis, Joan M., D.D.S. Board of Dentistry	12/31/11
McQuiddy, Merry, J.D. Public Member	12/31/09
O'Connor, Mary, L.M.S.W. Board of Social Work	12/31/10
O'Handley, Patricia, D.V.M. Board of Veterinary Medicine	12/31/12
Rolston, Steve, N.H.A. Board of Nursing Home Administrators	12/31/11
Rosen, Seymour R., O.D. Board of Optometry	12/31/10
Walkons, Christine, L.P.C. Board of Counseling	12/31/11
Westbrook, Joan, PA-C Task Force on Physician's Assistants	12/31/11
Board of Physical Therapy	Vacant
Board of Occupational Therapy	Vacant
Public Member	Vacant

Ex-Officio Members

Ramsdell, Rae, Ex-Officio, Bureau of Health Professions
Representing Department Director
Bushong, Susan M., L.B.S.W., Contract Administrator/Outreach Coordinator
Bureau of Health Professions

The following appointment was made on 9/28/10:

Dennis Muzzi, LMSW Board of Social Work	12/31/12
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The following appointment was made on 10/29/10:

Joseph Rainey, LMFT Board of Marriage & Family Therapy	12/31/11
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The following appointment was made on 1/6/11:

Kitrinka McKenzie, RN Board of Nursing	12/31/12
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The following appointment was made on 5/12/11:

Gordon Roberts, DC Board of Chiropractic	12/31/11
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Schedule of Committee Meetings
Fiscal Year 2010/2011

December 13, 2010 (cancelled)

March 21, 2011

June 20, 2011

September 19, 2011 (cancelled)

Accomplishments

- The Committee continues to review the HPRP policies and procedures to identify potentially needed changes to ensure accurate monitoring.
- A Policy and Procedure was developed and approved for the Anesthesia professionals.
- Policies regarding Pain Management, Mental Health and Medical Marijuana continue to be evaluated for inclusion and implementation.
- The HPRP Outreach Worker continues to increase educational and outreach efforts for the program, statewide, to hospitals and other treatment facilities as well as educational facilities to ensure awareness of signs of impairments and resources for referral.
- A database continues to be upgraded for use by the contractor to assist with monitoring program participants. The updated database is anticipated to allow monitoring staff to more quickly identify any issue of non-compliance as well as provide data regarding the use and effectiveness of the program.
- The HPRP website, www.hprp.org, has been updated to allow for on-line submission of required reports and to include more relevant information for anyone requesting information on the program.

Controlled Substances Advisory Commission

The Controlled Substances Advisory Commission was established by Public Act 60 of 1988, to monitor indicators of controlled substance abuse and diversion, to recommend actions to address diversion and identified problems of abuse and diversion. The Commission consists of 13 voting members and 7 ex-officio members.

Member Representing	Term Expires
Blanchard, Charles Pharmaceutical Manufacturers, Haslett	8/30/11
Bugbee, Nina, R.N. Board of Nursing, Flushing	8/30/11
Farida, Suhair, R.Ph. Board of Pharmacy, West Bloomfield	8/30/11
Dull, David, M.D. Board of Medicine, Ada	8/30/11
Hennessey, Rhonda, D.D.S. Board of Dentistry, Northville	8/30/11
Letsche, Lawrence, D.V.M. Board of Veterinary Medicine, Plymouth	8/30/11
Monteith, Scott, M.D. Psychiatry Profession, Traverse City	8/30/11
Saadeh, Claire, Pharm D Pharmacology Profession, Dewitt	8/30/11
Kezelian, Harry, D.P.M. Board of Podiatric Medicine & Surgery, Bloomfield	8/30/11
Vanator, Douglas, D.O. Board of Osteopathic Medicine & Surgery, Olivet	8/30/11
Smith, Dennis Public Member	8/30/11
Sullivan, Brian Public Member	8/30/11
Hemphill, Darnarius Public Member	8/30/11

Ex-Officio Members

- Brim, Melanie B., Director, Bureau of Health Professions
Department of Community Health
- Stokes, Wanda, Division Chief, Licensing & Regulation Division
Department of Attorney General
- Kenyon, James, R.Ph., Bureau of Medicaid Program
Department of Community Health
- Wissel, Michael, R.Ph., Drug Control Administrator
Department of Community Health

Vacant
Director of Public Health
Vacant
Department of Education
Vacant
Department of Michigan State Police

Note: New members have not been appointed as of the date of this report.

**Schedule of Commission Meetings
Fiscal Year 2010/2011**

January 18, 2011
April 19, 2011 (cancelled – no quorum)
July 19, 2011 (cancelled – no quorum)
October 25, 2011 (cancelled – no quorum)

Business discussed at the January 18, 2011 meeting included an update on House Bill 6026 regarding prosecution for doctor shoppers, the request for a grant extension by Substance Abuse and Mental Health Services Administration (SAMHSA) to continue the MAPS Intervention Program, and a presentation by Mark Menestrina, M.D., titled *Addiction Treatment in the New Millennium, From Jail Cells to Brain Cells*.

Michigan Automated Prescription System

The Michigan Automated Prescription System (MAPS) is the state mandated prescription monitoring program for the State of Michigan. The MAPS program is used to identify and prevent drug diversion at the prescriber, pharmacy and patient levels by collecting prescription data listed in Schedules 2-5 controlled substances dispensed by pharmacies and practitioners.

Pharmacists and dispensing prescribers are required to report all controlled substances they dispense to MAPS on a bi-monthly basis. A rule change has been introduced which will require weekly reporting in an effort to provide the most current prescription information on MAPS reports.

Upon registration to MAPS Online, prescribers query the electronic MAPS database, for patient-specific reports which allow a review of the patient's previous Schedule 2-5 controlled substance prescription records to determine if patients are receiving controlled substances from another provider. MAPS is available 24/7 and reports are available for review almost immediately upon the practitioner's request. Law enforcement agencies in Michigan also register to MAPS Online to obtain prescription data for bona fide drug-related criminal investigatory or evidentiary purposes.

The recent U.S. Drug Enforcement Agency (DEA) rule change that allows practitioners the option of writing prescriptions for controlled substances electronically, and permits pharmacies to receive, dispense and archive electronic prescriptions, required an enhanced ASAP (American Society for Automation in Pharmacy) reporting version to allow MAPS to accept and process electronic prescriptions. ASAP 4.1 (2009) was implemented on May 1, 2011.

The system is currently providing approximately 2,600 reports daily to practitioners, pharmacists, and law enforcement agencies. There are approximately 18,000 MAPS users, which is approximately 25% of the licensed health professionals in Michigan.

A total of 18,869,836 prescriptions were reported to MAPS in 2011. Hydrocodone combinations such as Vicodin, Norco, Lorcet and Lortab accounted for 5,883,212 prescriptions or 31% of the total number dispensed.

MAPS operations also include notification to prescribers when MAPS information indicates their patient may be a doctor shopper, which is an individual who visits numerous doctors and pharmacies to obtain controlled substances for the purpose of abuse or diversion. The goal of informing practitioners of possible doctor shoppers is to assist them in taking corrective action for the patient and provide the patient with guidance for substance abuse and addiction treatment. A federal grant was received in February 2011 to automate the notification letter process, which allows the system to send nearly 2,500 notification letters per month rather than 2,500 notification letters per year.

Enacted legislation, Public Act 354 of 2010, now makes it a crime for an individual to fraudulently obtain or attempt to obtain a controlled substance or a prescription for a controlled substance from a health care provider to be charged. A violation would be a felony punishable by imprisonment by up to four years and/or a fine of up to \$5,000.

MAPS is currently working on implementing an interstate data exchange program whereby practitioners can request data from other states directly through MAPS. The system is expected to become operational with several states in early 2012.

A contract with HTC Global Services continues to provide a full-time programmer placed within DTMB to facilitate the full transition of the MAPS system to DTMB. An additional programmer has been provided to assist in the efforts of enhancing the database to accept electronic prescriptions. MAPS operations continue to be administered by the Bureau.

This report satisfies the requirements of MCL 333.7113(2).

Professional Practice Section

The Workforce Development, Research & Evaluation Section (WDRE) was established in August 2006 and is housed in the Administration Division within the Bureau of Health Professions. The name of the section was changed in 2009 to the Professional Practice Section to encompass its broader range of activities.

The Professional Practice Section is responsible for ongoing efforts and various projects including:

- Licensing surveys received by licensees and registrants in their license/registration renewal notice mailings. The information obtained from these completed surveys determines current and future healthcare workforce trends and needs as well as professional practice issues such as practice specialty, the use of E-health practices, and the acceptance of Medicaid and Medicare. Professions surveyed to date include nurses, physicians, physician residents, dentists, dental hygienists, pharmacists and physician's assistants. Since 2009, the physician survey contains a section with questions that measure pain management knowledge, attitudes, and practices.
- A *Health Careers in Michigan* website (www.michigan.gov/healthcareers) that provides comprehensive information about careers in the healthcare field, the skills and education needed to pursue various careers, licensing requirements, and employment information.
- A *Patient Safety* website (www.michigan.gov/patientsafety) that provides information for health professionals and the general public related to patient safety issues.
- A *Pain Management* website (www.michigan.gov/pm) that provides information regarding pain and symptom management for health professionals and the general public, as well as a section for the Advisory Committee on Pain and Symptom Management.
- Publication of a quarterly newsletter titled *Public Forum*. This newsletter addresses health issues impacting the public and is electronically disseminated to health clinics and health professionals to have available for their patients. It can also be electronically submitted to members of the general public upon request. The newsletter provides a wide array of health-related information that is of interest to both the general public and the health professionals who provide care for Michigan's citizens.
- Publication and distribution of the biannual newsletter *MiPainManagement* to several health professions. This newsletter is designed to provide healthcare professionals with information regarding pain and symptom management. It includes information regarding best practices, training and efforts to improve pain management in Michigan by the state's pain management program.
- Development of resources for licensed and registered health professionals around a host of professional practice, healthcare workforce and licensure/regulation issues. A recent resource was the development in 2010 of an online three-part training module for physicians on Licensing, Professionalism and Regulation.

- Staff response to over 2,000 inquiries annually from health care licensees and the public regarding scope of professional practices, regulatory issues, and issues impacting patient care.
- Provides administrative support and guidance for the Advisory Committee on Pain and Symptom Management (ACPSM).
- Serves as the contract administrator for the Michigan Center for Health Professions and the Michigan Center for Nursing, and to manage the annual Master Agreement for the licensee surveys and physician training module.

Advisory Committee on Pain and Symptom Management

The Advisory Committee on Pain and Symptom Management (ACPSM) was originally established as the Interdisciplinary Advisory Committee under P.A. 232 of 1994. The statute was later amended under P.A. 421 of 1998 to create the current ACPSM. The committee was charged with making recommendations to the legislature in 2002, and issued a report that year containing 18 recommendations to improve pain and symptom management in Michigan. The State of Michigan enacted a number of legislative measures to improve pain and symptom management in Michigan between 1995 and 2004. These include eliminating the term “intractable pain” from the Public Health Code as the basis for use of opioid medication, requiring at least one hour of continuing education in pain management for nearly every health licensee in Michigan, establishing the right of all Michigan citizens to have their pain managed as part of their overall health care, and a number of new pharmacy regulations making opioid medication more available to all Michigan citizens.

In May 2006, the Committee was reconvened with newly appointed members to continue working on the recommendations of the prior committee and consider new recommendations regarding pain and symptom management issues that had arisen since the 2002 recommendations. Appointments to the Committee are made by designated licensing boards and the Governor.

In 2006, the newly established Workforce Development, Research and Evaluation (WDRE) Section assumed the responsibility of working on the committee’s 2002 recommendations. One of these efforts was to develop a pain and symptom management website (www.michigan.gov/pm), which was launched in 2007 to provide in-depth pain management information to health professionals and the general public, and to establish a section for the ACPSM. Information for professionals includes state and national guidelines, relevant Michigan legislation, educational links, articles and publications. Information for the public includes definitions, myths and treatment options, end of life care, state and national guidelines, a section of pain related conditions, and recommendations for palliative care. The ACPSM section contains background information on the committee, all meeting agendas and minutes since 2006, and ACPSM resource documents and reports.

In 2008, the Pain Management and Palliative Care Program (PMPCP) was established in the Workforce Development, Research and Evaluation (WDRE) section, which was renamed the Professional Practice Section (PPS) in 2009. In order to meet other 2002 recommendations of the committee, the PMPCP has actively promoted the Michigan Automated Prescription System (MAPS) to all prescribers through print and electronic media, including a DVD on MAPS and pain management that was distributed in March 2011. The program has also published and distributed a customized version of a booklet published by the Federation of State Medical Boards, *Responsible Opioid Prescribing: A Physicians Guide*, to licensed prescribers and dispensers. In addition, between 2008 and 2011 the PMPCP worked with the ACPSM to develop and implement a number of other projects aimed at completing the committee’s 2002 and 2009 recommendations, including sending pain management curriculum guidelines to 105 training schools in Michigan, conducting a survey of Michigan pharmacies to determine their supplies of pain medications, sponsoring pain management conferences and training opportunities for health professionals, and a host of other activities impacting professionals and health consumers.

The Committee provides professional expertise and consultation to the state's PMPCP. A wide range of health professionals and two general public members make up this important advisory body.

The 2010/11 Committee members* are:

Member Representing/Appointed By	Term Expires
Brim, Melanie, Director, Chair MDCH/Bureau of Health Professions	6/30/11
Brintnall, Ruth Ann, R.N., M.S.N., Ph.D. Grand Valley State University/Board of Nursing	6/30/11
Chafty, Michael D., M.D., J.D. Board of Medicine	6/30/11
Clauw, Daniel J., M.D. University of Michigan School of Medicine/Governor	6/30/11
Dobritt, Dennis W., D.O. Board of Osteopathic Medicine & Surgery	6/30/11
ElGeneidy, Ahmed, D.D.S. Board of Dentistry	6/30/11
Friend, Jean Public Member/Governor	6/30/11
Geraci, Ralph A., PA-C Task Force on Physician's Assistants	6/30/11
Lewandowski, Alan, Ph.D. Board of Psychology	6/30/11
Lewandowski, Jeanne, M.D. Board of Medicine	6/30/11
McCall, Frenchie, L.M.S.W. Chronic Pain Sufferer/Governor	6/30/11
Morrone, William, D.O. Board of Osteopathic Medicine & Surgery	6/30/11
Prokop, Lawrence L., D.O. Michigan State University, College of Osteopathic Medicine	6/30/11
Roskos, Steven E., M.D. Michigan State University, College of Human Medicine	6/30/11
Saadeh, Claire, Pharm.D., BCOP Board of Pharmacy	6/30/11
Silveira, Maria J., M.D., M.A., M.P.H. Michigan Hospice and Palliative Care Association/Governor	6/30/11
Stellini, Michael A., M.D. Wayne State University School of Medicine/Governor	6/30/11

*In July 2011, the two-year terms of the members expired and new members were appointed to the committee. The new list of committee members will be provided in the 2011/12 report.

The following projects were undertaken by the PMPCP in FY 2010 and FY 2011 in order to meet the Committee's 2002 remaining recommendations and eight new recommendations developed in November 2009:

1. Held three of four scheduled meetings of the ACPSM on October 29, 2009, April 29, 2010 (the November 4, 2010 meeting was cancelled due to lack of Quorum), and April 28, 2011. The Committee established eight (8) recommendations* targeted for completion in FY 2010 and FY 2011:
 - o Convene a special meeting of state medical schools to explore ways to improve pain management education in both the medical school curriculum as well as the residency experience.
 - o Present 5-10 comprehensive trainings on pain management to be offered to health care professionals and pre-professionals at key Michigan locations. The state should also make available such training as an online module and seek CME/CE sponsorship to make the training widely accessible.
 - o Improve pain and symptom management of the elderly and those with advanced illnesses by impacting health professionals, patients, and their families in long term care environments.
 - o Increase the use of MAPS by health professionals and make the MAPS data and information regarding the use of controlled substances more available to health professionals.
 - o Introduce a bill to promote alternative remediation for health care providers failing to appropriately prescribe or dispense controlled substances.
 - o The Bureau Health Professions should fully utilize its communication resources to disseminate pain management information to health care professionals, such as the FSMB Model Guidelines on pain management, MAPS information, state-sponsored pain management trainings, and other resource information.
 - o Develop and implement strategies designed to improve the public's knowledge, attitudes and practices regarding pain and symptom management.
 - o MDCH/LARA, together with the Boards of Medicine and Osteopathic Medicine and Surgery, should determine that the practice of Interventional Pain Management is the practice of medicine. The Boards should determine what specific practices of interventional pain management can be delegated to other health professionals.

*The committee's new recommendations for FY 2012 and FY2013 were developed at the November 2011 meeting, and will be shown in the next report.

2. Distributed over 70,000 copies of the booklet *Responsible Opioid Prescribing: A Guide for Michigan Physicians* to licensed health professionals located in Michigan (M.D. and D.O. physicians and medical residents, dentists, pharmacists, podiatrists, optometrists, physician's assistants and advance practice nurses). Each year the booklet will be distributed to all of these newly licensed professionals.
3. Completed production of a new DVD *Michigan Automated Prescription System (MAPS) and Effective Pain Management* that was distributed in May 2011 to all of the same Michigan health licensees targeted for booklet distribution (above). Each year the DVD will be distributed to all of these newly licensed professionals.
4. Launched the newsletter *MiPainManagement* for Michigan health care professionals in Fall 2010 and distributed the first issue to all of the nearly 400,000 health licensees in Michigan (excluding sanitarians) The newsletter was distributed to all newly licensed health professionals in Michigan in Spring 2011 and Fall 2011.
5. In March 2010, provided pain management training to nurses at the *Annual Joint Provider/Surveyor Training* of the Bureau of Health Systems, Michigan Department of Community Health. Follow up training was conducted with HCAM and with the Aging Services of Michigan.

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6. Conducted the second and third annual Physician Pain Management Survey, which is an optional survey during license renewal. This survey is a statistically reliable and valid tool to measure the impact of PMPCP strategies and is used in program planning. The results revealed some data suggesting the efforts of the state pain management program were making an impact on the pain management attitudes, knowledge and practices of Michigan physicians.
 7. Conducted the second Pain Management telephone survey of the public in spring 2011 (the first was conducted in spring of 2009). Survey results revealed data suggesting the efforts of the state pain management program were making an impact on pain management attitudes, knowledge and practices of Michigan citizens.
 8. Co-sponsored the two major pain management fall conferences in Michigan (the *Annual MSU Conference on Pain* and the *Annual Palliative Care Collaborative*) in both 2010 and 2011.
 9. Held the second and third Annual Pain and Palliative Care Assembly, sponsored by the Bureau of Health Professions and the Michigan Hospice & Palliative Care Organization.
 10. Presented at the FY 2010 and FY 2011 Annual Scientific Meetings of the Michigan State Medical Society.
 11. Conducted a Pain Management Medical School Curriculum Summit in May 2011. Six of the seven existing and new medical schools attended the half-day summit, during which a model guideline for how to improve the pain management components of the schools' four-year medical school curriculum was explored.
 12. In spring 2010, the bureau supported a pain management survey of rural health providers conducted by the Michigan Center for Rural Health. The survey assessed the knowledge and practices of rural health providers, and identified the barriers to effective pain management in rural settings.
 13. In spring 2011, the bureau supported an online pain management training conducted by the Michigan Center for Rural Health for rural health providers in follow up to the survey of rural health providers conducted in spring 2010.
 14. Held numerous meetings and presentations at selected licensing boards, health care facilities, professional associations, and numerous stakeholder agencies regarding the resources of the PMPCP and various issues of pain and symptom management.
 15. Held numerous meetings and presentations to selected licensing boards, health care facilities, professional associations, and stakeholder agencies regarding MAPS by the Pharmacy Section of the Bureau of Health Professions and the PMPCP.

Healthcare Workforce Activity

The Bureau of Health Professions has been engaged in work related to Michigan's healthcare workforce since 2003. In 2004, the Bureau established the Michigan Healthcare Workforce Center. The Center's purpose is to serve as a clearinghouse for workforce data through their website (www.michigan.gov/mhwc), administer surveys to licensed health professionals, convene and/or participate with groups to address workforce issues, and conduct research and publish papers on workforce related issues. In 2006, the Bureau established the Workforce Development, Research and Evaluation Section to staff the Center's activities. The activities include managing a contract with the Michigan Health Council to develop and maintain the Michigan Center for Health Professions and the Michigan Center for Nursing:

Michigan Center for Health Professions

The Michigan Center for Health Professions at the Michigan Health Council was established in 2005 as a central source for information on the recruitment, education and retention of health professionals in Michigan.

The goals of the Michigan Center for Health Professions are to:

- Establish a central forum for exploring and addressing needs and issues that impact the supply and career mobility of health professionals
- Foster collaboration among representatives of key health disciplines, educators, employers, and government regulators
- Locate existing data sources and identify any gaps in the data
- Collect additional information to evaluate the supply and demand of health professionals in Michigan
- Provide a clearinghouse of educational resources and information to assist academic institutions in strengthening the education of health professionals in Michigan

2011 accomplishments of the MCHP include:

- Convened regular stakeholder meetings of a professional advisory board to develop, implement and improve strategies to enhance Michigan's healthcare workforce.
- Produced the white paper *A Profile of Michigan's Nurse Practitioner and Physician Assistant Workforce 2011*.
- Maintained the MCHP website and published MCHP newsletters, which offer employment assistance and other professional resources.

Michigan Center for Nursing

The Michigan Center for Nursing at the Michigan Health Council was created in 2003 to champion the nursing workforce through on-going collaboration, communication and consensus building.

The goals of the Michigan Center for Nursing are to:

- Develop recommendations for cultivating and maintaining a high-quality nursing workforce that meets the demand for nursing services in Michigan
- Foster strategic alliances among nurses, educational institutions, health care systems, the business community and other stakeholders for improvement in the recruitment, education, retention of nurses and the delivery of health care
- Establish a central resource for nursing workforce data collection and analysis

2011 accomplishments of the MCN include:

- Conducted the 2011 survey of licensed nurses in Michigan
- Convened regular stakeholder meetings of a professional advisory board and collaborate with the MDCH Office of the Chief Nurse Executive to develop, implement and improve strategies to enhance Michigan's nursing workforce
- Provided important professional information to Michigan nurses through their website, newsletter, and State conferences