

*Michigan Department
of Community Health*



**Jennifer M. Granholm, Governor
Janet Olszewski, Director**

**2008/2009 ANNUAL REPORT
OF THE
BUREAU OF HEALTH PROFESSIONS**

Michigan Department of Community Health
Bureau of Health Professions
P.O. Box 30670
Lansing, Michigan 48909-8170
www.michigan.gov/healthlicense
(517) 335-0918

Authority: Act 368 of 1978, as amended
Total Copies: 450; Total Cost: \$: Unit Cost: \$

TABLE OF CONTENTS

Bureau Information 3
Bureau Overview 4
Fiscal Year 2008/2009 Budget 6
Licensing Statistics 7
Disciplinary Actions..... 10
Board of Acupuncture 12
Board of Athletic Trainers 13
Board of Audiology 14
Board of Chiropractic..... 16
Board of Counseling 18
Board of Dentistry 20
Board of Dietetics and Nutrition 25
Board of Marriage and Family Therapy 26
Board of Massage Therapy 28
Board of Medicine..... 29
Board of Nursing..... 32
Board of Nursing Home Administrators 36
Board of Occupational Therapists 38
Board of Optometry 40
Board of Osteopathic Medicine and Surgery 42
Board of Pharmacy 44
Board of Physical Therapy..... 47
Joint Task Force on Physician's Assistants 50
Board of Podiatric Medicine and Surgery 52
Board of Psychology..... 54
Board of Respiratory Care 56
Sanitarian Registration 58
Board of Social Work..... 59
Board of Speech-Language Pathology 62
Board of Veterinary Medicine 63
Additional Rule Promulgation Activity 65
Michigan Medical Marihuana Registry 66
Health Professional Recovery Committee 67
Controlled Substances Advisory Commission 70
Michigan Automated Prescription System 72
Professional Practice Section 73
Advisory Committee on Pain and Symptom Management 74
Interagency Healthcare Workforce Coordinating Council 76
Healthcare Workforce Committee Activity 77

The Department of Community Health will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political belief. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

Bureau of Health Professions

Bureau Administration

Melanie Brim, Director	(517) 373-8068
Health Professional Recovery Program	(800) 453-3784
Web Site Address	www.michigan.gov/healthlicense
Professional Practice Section	(517) 373-8068

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

Rae Ramsdell, Director	(517) 335-7212
Policy/Board Support Section	(517) 335-0918
Enforcement Section	(517) 373-4972
Compliance Section	(517) 335-3114
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.

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, 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.

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

Fiscal Year 2008/2009 Budget

Appropriated F.T.E.s	145
Legislative Appropriation	\$20,352,400
FINANCIAL PLAN:	
Salary and Wages	\$6,671,300
Longevity and Insurance	\$1,431,500
Retirement & FICA	\$2,140,700
CSS&M	\$1,274,600
Travel	\$210,600
Contracts	\$6,007,300
TOTAL	\$17,736,000

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>
Audiology					
Audiologist	12		13	223	509
Audiologist Limited	1			0	1
Chiropractic					
Chiropractors	108		111	1,391	2,879
Ed. Ltd. Chiropractor	18			0	9
Counseling					
Counselors	298		45	2,249	5,586
Ed. Ltd. Counselors	545			1,976	2,342
Dentistry					
Dentists	189		277	2,454	7,728
Dentist Limited	0			2	2
Dentist – Nonclinical Ltd.	0			1	1
Ed. Ltd. Dentists	19			21	51
Clinical Academic Dentists	13			41	57
Dental Specialists		19 (95% Passed)	0		
Prosthodontist	0			19	58
Endodontist	4			59	169
Oral Surgeon	2			87	234
Orthodontist	10			124	369
Pediatric Dentist	4			33	114
Periodontist	6			44	153
Oral Pathologist	0			3	8
Dental Hygienists	344		188	3,337	10,173
Clinical Academic Hygienists	0			0	0
Nitrous Oxide Certification	111				1,756
Local Anesthesia Certification	111				2,213
Dental Assistants	129	135 (82% Passed)	2	487	1,453
Dental Asst – Nonclinical Ltd.	0			1	1
Dentist – Special Volunteer	7			1	14
Marriage and Family Therapy					
Marriage & Family Therapists	20	8 (88% Passed)	6	359	738
Ed. Ltd. MFT	23			70	96
Medicine					
Medical Doctors	1,709	478 (89% Passed)	*653	10,093	31,815
Medical Doctor – Limited	0			0	1
MD – Special Volunteer	6			0	23
Clinical Academic MD	27			68	90
Ed. Ltd. MD	1,299			2,520	3,809

**Department of Community Health
Bureau of Health Professions**

2008/2009 Annual Report

<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>
Nurse Aides		10,106		14,890	52,216
Nursing					
Registered Nurses	6,834	5,261 (84% Passed)	4,131	63,286	129,978
RN Provisional	175				85
Nurse Specialists					
Anesthetists	146			1,149	2,354
Midwives	17			153	310
Practitioners	272			1,742	3,688
Practical Nurses	2,166	1,840 (95% Passed)	463	13,224	27,579
Nursing Home Administrators	138	200 (45% Passed)	33	481	1,242
Occupational Therapy					
Occupational Therapists	184		134	2,082	4,521
Occupational Therapy Assts.	116		33	586	1,221
Optometry					
Optometrists	53		42	771	1,587
DPA Specialty Certification				0	1,505
TPA Specialty Certification				0	1,465
Osteopathic Medicine & Surgery					
Osteopathic Doctors	359		*159	2,068	6,697
Clinical Academic DO	0			0	0
Ed. Ltd. DO	447			607	1,042
Osteo – Special Volunteer	0			0	1
Pharmacy					
Pharmacists	505	330 (80% Passed)	238	6,358	12,931
Jurisprudence		583 (85% Passed)			
Ed. Ltd. Pharmacists	432			1,129	1,458
Pharmacies	259		67	1,487	3,044
Manufacturer/Wholesaler	156		166	538	1,002
Physical Therapy					
Physical Therapists	1,286	1,398 (47% Passed)	1,018	4,436	8,876
Phys Therapist Assistants	118	(new profession)		0	0
Physician's Assistant					
Physician Assistants	246		99	1,593	3,394

**Department of Community Health
Bureau of Health Professions**

2008/2009 Annual Report

<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>
Podiatric Medicine and Surgery					
Podiatrists	37	22 (100% Passed)	28	230	768
Ed. Ltd. Podiatrists	29			27	56
Psychology					
Psychologists	114	127 (73% Passed)	120	1,350	2,826
Doctoral Limited	90			155	234
Masters Limited	183			1,698	3,605
Temporary Limited	152				412
Respiratory Care					
Respiratory Therapists	337		92	2,174	4,718
Sanitarian					
Sanitarians	2		2	256	535
Social Work					
Social Services Technician	140		190	686	1,777
Social Services Ltd. Tech.	17			13	22
Bachelors Social Worker	76	66 (71% Passed)		2,267	5,581
Bachelors Ltd. S.W.	209			496	656
Masters Social Worker	567	Clinical 706 (55% Passed) Macro 27 (66% Passed)		5,923	14,308
Masters Ltd. S.W.	817			2,695	3,445
MSW Macro Specialty	4			0	12,931
MSW Clinical Specialty	12			0	14,043
Veterinary Medicine					
Veterinarians	161		175	1,852	3,727
Clinical Academic Vet.	13			63	79
Ed. Ltd. Vet.	0			1	1
Veterinary Technicians	196	Mich. 199(83% Passed) Nat'l 182 (90% Passed)	25	914	2,291
TOTAL	21,842		8,510	148,153	324,533
					Not including 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.*

Disciplinary Actions

Profession	Reprimand	Probation	Fine	Voluntary Surrender	Limited License	Suspension	Revocation	Total
Audiology	0	2	0	0	0	1	0	3
Chiropractic	0	8	3	2	0	1	0	14
Counseling	0	1	0	1	0	4	0	6
Dentistry	1	34	9	5	2	8	0	59
Marriage & Family Therapy	0	0	0	0	0	0	0	0
Medicine	0	5	36	4	11	23	5	84
Nursing	6	156	18	4	8	132	1	325
Nursing Home Administrators	0	1	0	0	1	0	0	2
Occupational Therapy	0	0	0	0	0	1	0	1
Optometry	0	1	1	1	0	0	0	3
Osteopathic Med & Surgery	0	11	8	2	3	5	1	30
Pharmacy	6	39	21	1	10	17	2	96
Physical Therapy	0	0	0	0	0	2	0	2
Physician's Assts.	0	2	2	0	2	4	1	11
Podiatric Med & Surgery	0	1	0	0	0	2	0	3
Psychology	0	5	5	1	2	2	0	15
Respiratory Care	0	3	0	0	0	1	0	4
Sanitarians	0	0	0	0	0	0	0	0
Social Work	0	5	0	0	7	13	1	26

**Department of Community Health
Bureau of Health Professions**

2008/2009 Annual Report

Profession	Reprimand	Probation	Fine	Voluntary Surrender	Limited License	Suspension	Revocation	Total
Veterinary Medicine	1	7	1	0	1	1	0	11
Bureau Totals	14	281	104	21	47	217	11	695

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 Michigan Board of Acupuncture consists of 9 voting members: 4 acupuncturists, 3 physicians who are licensed to practice medicine or osteopathic medicine and surgery, and 2 public members.

Board Members	Term Expires
Lincoln, Deborah E., R.N., M.S.N., Chair East Lansing	6/30/10
Pettet, Jason T., Vice Chair South Haven	6/30/11
Abel-Horowitz, Howard, M.D. Franklin	6/30/09
Kaminsky, Arthur L., M.D. Marquette	6/30/11
Pappas, John L., M.D. Bloomfield Hills	6/30/10
Roach, Chrystal, Public Member Fremont	6/30/10
Sousley, Rhonda, Ph.D. Rochester Hills	6/30/12
Steigenga, Matthew, Public Member East Lansing	6/30/11
Wright, Leonard D., M.D. Muskegon	6/30/09

Schedule of Board Meetings

Fiscal Year 2008/2009

January 16, 2009 (cancelled)
March 13, 2009 (cancelled)
June 12, 2009 (cancelled)
September 18, 2009 (cancelled)

Licensing Activity

No licensing activity yet

Michigan Board of Athletic Trainers

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 Michigan Athletic Trainer Board consists of 7 voting members: 4 athletic trainers, 2 licensed physicians (allopathic or osteopathic) and 1 public member.

Board Members	Term Expires
Berry, Ann L., Chair Canton	12/31/09
Corbin, Dennis R., Vice Chair Kalamazoo	12/31/09
Baker, Robert J., M.D. Kalamazoo	12/31/09
Bupp, William F., Public Member Dewitt	12/31/10
Nassar, Lawrence G., D.O. Holt	12/31/09
Ryan, Laurie L. Ada	12/31/11
Sorge, Rodney A. Ann Arbor	12/31/08

Schedule of Board Meetings

Fiscal Year 2008/2009

October 24, 2008

January 9, 2009

July 20, 2009

Licensing Activity

No licensing activity yet

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 St. Joseph	6/30/11
Korpela, Lari P., Vice Chair Livonia	6/30/09
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	6/30/10
Schroeder, Virginia Dearborn Heights	6/30/12
Seidman, Michael D., M.D. West Bloomfield	6/30/12
Zuckschwerdt, Diane C. Corunna	6/30/09

Schedule of Board Meetings

Fiscal Year 2008/2009

November 14, 2008

February 13, 2009

May 29, 2009

August 28, 2009 (DSC)

Licensing Activity

Audiologists

Applications Received	12
Number of Licensees	509

Audiologists – Limited

Applications Received	1
Number of Licensees	1

Random Continuing Education Audits

Audited	16
Complied	13

Regulatory Activity

Allegations Received	10
Administrative Investigations	23
Field Investigations Authorized	1
Field Investigations Completed	1
Administrative Complaints Filed	1
Summary Suspensions Filed	2
Cease and Desist Orders Issued	0

Board Disciplinary Actions

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

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 health arts which deals with the nervous system and its relationship to the spinal column and its inter-relationship 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 Woodhaven	12/31/10
Eisman, Jeffrey, D.C. West Bloomfield	12/31/10
Fellow, Charles, Public Member South Lyon	12/31/11
Frenette, Gwendolyn, Public Member Ionia	12/31/09
Knight, Philip, D.C. Marshall	12/31/11
Michelin, Lois, Public Member Newberry	12/31/09
Morse, Michael, Public Member Huntington Woods	12/31/09
Rodnick, Corey, D.C. Midland	12/31/11

Schedule of Board Meetings

Fiscal Year 2008/2009

November 18 2008

January 8, 2009

March 10, 2009

May 5, 2009

July 14, 2009

September 15, 2009

Licensing Activity

Chiropractors

Applications Received	108
Number of Licensees	2,879

Educational Limited Chiropractors

Applications Received	18
Number of Licensees	9

Random Continuing Education Audits

Audited	74
Complied	60

Renewal Continuing Education Audits

Audited	25
Complied	25

Regulatory Activity

Allegations Received	64
Administrative Investigations	88
Field Investigations Authorized	17
Field Investigations Completed	13
Administrative Complaints Filed	16
Summary Suspensions Filed	4
Cease and Desist Orders Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	8
Fine	3
Voluntary Surrender	2
Limited License	0
Suspension	1
Revocation	0
Total Disciplinary Actions	14

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
Itskowitz, Stuart G., L.P.C., Chair St. Clair Shores	6/30/11
Turowski, Marion, L.P.C., Vice Chair Troy	6/30/09
Hampton, Steven D., L.M.S.W. Traverse City	6/30/10
Owens, Delila L., Ph.D., L.P. C. Royal Oak	6/30/11
Pate, Julian E, III, Public Member Farmington Hills	6/30/09
Singleton, Harriet A., L.P.C. Kentwood	6/30/08
Steward, Robbie J., L.P.C. Okemos	6/30/09
Wuori, Thomas J., Public Member Kalamazoo	6/30/10
Vacant, Professional Member	
Vacant, Public Member	
Vacant, Public Member	

The following appointments were made on 10/15/08:

Burkett, Martha, L.P.C. (replaced Dugger) Portland	6/30/12
Hunt, Meredith, Rev., Public Member (replaced Effendi) Sturgis	6/30/10
LeClear, Laura, Public Member (replaced Rouleau) Richland	6/30/10

The following appointment was made on 8/02/09:

Kelley, Mary L., Ed.D., Public Member (replaced Pate) Northville	6/30/13
---	---------

Schedule of Board Meetings
Fiscal Year 2008/2009

December 5, 2008

March 6, 2009

June 5, 2009

September 11, 2009

Licensing Activity

Counselors

Applications Received 298

Number of Licensees 5,586

Educational Limited Counselors

Applications Received 545

Number of Licensees 2,342

Regulatory Activity

Allegations Received 29

Administrative Investigations 32

Field Investigations Authorized 14

Field Investigations Completed 14

Administrative Complaints Filed 4

Summary Suspensions Filed 4

Cease and Desist Orders Issued 0

Board Disciplinary Actions

Reprimand 0

Probation 1

Fine 0

Voluntary Surrender 1

Limited License 0

Suspension 4

Revocation 0

Total Disciplinary Actions 6

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
Hennessy, Rhonda, D.D.S., Chair Northville	6/30/12
Haber, Lawrence M., D.D.S. Commerce Township	6/30/13
Beatty-Desonia, Lynn, R.D.H. Dewitt	6/30/12
Bera, Julie, R.D.A. Rockford	6/30/10
Buchheister, Jo Ann, C.D.A., R.D.A., B.S. Troy	6/30/11
Freij, Randy M., D.D.S. Livonia	6/30/10
Hodder, Joanne A., R.D.H. Grand Rapids	6/30/13
Khan, Faiz, Public Member Sterling Heights	6/30/09

Manos, Deborah, D.D.S. Grosse Pointe Woods	6/30/12
Marinelli, Charles L., D.D.S. Bloomfield Hills	6/30/09
Maturo, Raymond, D.D.S. Ann Arbor	6/30/12
Pesis, Solomon K., D.D.S. Milford	6/30/11
Priestap, Deborah E., D.D.S. Milford	6/30/10
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
Spencer, Craig W., D.D.S. East Lansing	6/30/11
Swiger, Martha, R.D.H. Petoskey	6/30/12
Wyche, Charlotte, R.D.H. Chelsea	6/30/11

**Schedule of Board Meetings
Fiscal Year 2008/2009**

October 9, 2008
December 4, 2008
February 12, 2009
April 9, 2009
June 11, 2009
August 13, 2009

Licensing Activity

Dentists

Applications Received	189
Number of Licensees	7,728

Dentist – Limited

Applications Received	0
Number of Licensees	2

Dentist – Nonclinical Limited

Applications Received	0
Number of Licensees	1

Dental Specialty Licenses

Prosthodontists

Applications Received	0
Examinations Administered	0
Number of Specialty Licensees	58

Endodontists

Applications Received	4
Examination Administered	3
Number of Specialty Licensees	169

Oral Surgeons

Applications Received	2
Examinations Administered	1
Number of Specialty Licensees	234

Orthodontists

Applications Received	10
Examinations Administered	6
Number of Specialty Licensees	369

Pediatric Dentists

Applications Received	4
Examinations Administered	3
Number of Specialty Licensees	114

Periodontists

Applications Received	6
Examinations Administered	2
Number of Specialty Licensees	153

Oral Pathologists

Applications Received	0
Number of Specialty Licensees	8

Educational Limited Dentists

Applications Received	19
Number of Licensees	51

Clinical Academic Dentists

Applications Received	13
Number of Licensees	57

Registered Dental Hygienists

Applications Received	344
Number of Licensees	10,173

Clinical Academic Hygienists

Applications Received	0
Number of Licensees	0

**Specialty Certifications for
Dental Hygienists**

Nitrous Oxide

Applications Received	11
Number of Certifications	1,756

Local Anesthesia

Applications Received	112
Number of Certifications	2,213

Registered Dental Assistants

Applications Received	129
Examinations Administered	125
Number of Licensees	1,453

Dental Assistant – Nonclinical Ltd.

Applications Received	0
Number of Licensees	1

Random Continuing Education Audits
(audit still being conducted)

Dentists

Audited	65
Complied	56

Dental Assistants

Audited	13
Complied	10

Dental Hygienists

Audited	100
Complied	76

Renewal Continuing Education Audits

Dentists

Audited	31
Complied	30

Dental Assistants

Audited	14
Complied	14

Dental Hygienists

Audited	29
Complied	29

Regulatory Activity

Allegations Received	301
Administrative Investigations	473
Field Investigations Authorized	100
Field Investigations Completed	90
Administrative Complaints Filed	63
Summary Suspensions Filed	8
Cease and Desist Orders Issued	1

Board Disciplinary Actions

Reprimand	1
Probation	34
Fine	9
Voluntary Surrender	5
Limited License	2
Suspension	8
Revocation	0
Total Disciplinary Actions	59

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 Pellston	6/30/11
Newton, Coco, Vice Chair Ann Arbor	6/30/11
Christoph, Carl Farmington Hills	6/30/11
Magnuson, Eugene, Public Member Muskegon	6/30/11
Mowafy, Mohey, Ph.D. Marquette	6/30/11
Prout, William, Public Member Mt. Pleasant	6/30/11
Weatherspoon, Lorraine, Ph.D. Williamston	6/30/11

Schedule of Board Meetings

Fiscal Year 2008/2009

October 3, 2008
December 2, 2008
January 14, 2009
March 11, 2009
May 13, 2009
September 9, 2009

Licensing Activity

No licensing activity yet

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	6/30/10
Beckerson, Brett, Public Member Dearborn Heights	6/30/12
Harp, Sama, Public Member Dearborn Heights	6/30/09
Jordan, Diane M., L.M.F.T. Wyoming	6/30/07
Moriarty, James J., Ph.D. Bloomfield Hills	6/30/08
Taylor, Anita, M.A., L.L.P. Bloomfield Hills	6/30/09
Warsh, Deborah U., L.M.F.T. Bloomfield Hills	6/30/11
Watson, Shawntain, Public Member Muskegon	6/30/11

Schedule of Board Meetings

Fiscal Year 2008/2009

October 17, 2008 (cancelled)

January 23, 2009

April 17, 2009 (cancelled)

July 17, 2009 (cancelled)

Licensing Activity

Marriage and Family Therapists

Applications Received	20
Examinations Authorized	13
Number of Licensees	738

Educational Limited MFT's

Applications Received	23
Number of Licensees	96

Regulatory Activity

Allegations Received	8
Administrative Investigations	8
Field Investigations Authorized	6
Field Investigations Completed	5
Administrative Complaints Filed	2
Summary Suspensions Filed	0
Cease and Desist Orders 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.

The following appointments were made on 6/26/09:

Board Members	Term Expires
Armstrong, Karen, Chair Farmington Hills	12/31/12
Ryan, Michael, Vice Chair Marquette	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
Joda-Miller, Bilky Lansing	12/31/13
Kubizna, Jodi Grand Rapids	12/31/13
Mackowiak, Thomas, Public Member Lansing	12/31/13
Rudnianin, Harold Hancock	12/31/13
West, Amanda, Public Member Holt	12/31/13

No Board Meetings Held This Fiscal Year

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
Goldberg, Scot F., M.D., Chair Bloomfield Hills	12/31/09
Shade, George H., M.D. Vice Chair Farmington Hills	12/31/09
Ahmad, Busharat, M.D. Monroe	12/31/11
Alghanem, Abd A., M.D. Flint	12/31/11
Burney, Richard E., M.D. Ann Arbor	12/31/11
Cameron, Oliver G., M.D., Ph.D. Ann Arbor	12/31/09
Dull, David L., M.D. Ada	12/31/09
Fenn, William, P.A-C, Ph.D. Kalamazoo	12/31/10
Fraley, Theresa L., Public Member Huntington Woods	12/31/09
Graham-Solomon, Cheryl, Public Member Rochester Hills	12/31/09
Gudipati, Rao V.C., M.D. Freeland	12/31/11
Helmer, Michael K., Public Member Bloomfield Hills	12/31/09
Jones, Jeffrey M., M.D. Battle Creek	12/31/09
Larson, Lynn M., Public Member Traverse City	12/31/11
Leung, Vivian W., Public Member Okemos	12/31/09

Raines, Frank, III, Public Member Farmington Hills	12/31/11
San Diego, Leticia J., Ph.D., Public Member Clinton Township	12/31/09
Smith-Tyge, Nathaniel, Public Member Allen Park	12/31/10
Weingarden, David S., M.D. Southfield	12/31/09

Schedule of Board Meetings

Fiscal Year 2008/2009

November 12, 2008

January 28, 2009

March 18, 2009

May 20, 2009

July 15, 2009

September 16, 2009

Licensing Activity

Medical Doctors

Applications Received	1,709
Examinations Authorized	569
Number of Licensees	31,815

Medical Doctor – Limited

Applications Received	0
Number of Licensees	0

MD – Special Volunteers

Applications Received	6
Number of Licensees	23

Clinical Academic Doctors

Applications Received	27
Number of Licensees	90

Educational Limited Doctors

Applications Received	1,299
Number of Licensees	3,809

Random Continuing Education Audits

Audited	121
Complied	105

Renewal Continuing Education Audits

Audited	75
Complied	74

Regulatory Activity

Allegations Received	870
Administrative Investigations	797
Field Investigations Authorized	242
Field Investigations Completed	181
Administrative Complaints Filed	107
Summary Suspensions Filed	12
Cease and Desist Orders Issued	1

Board Disciplinary Actions

Reprimand	0
Probation	5
Fine	36
Voluntary Surrender	4
Limited License	11
Suspension	23
Revocation	5
Total Disciplinary Actions	84

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 Clinton Township	6/30/11
Clark, Margherita, R.N., M.S.N., Vice Chair St. Johns	6/30/11
Allen, Regina D., Public Member Lansing	6/30/11
Andersen, Bruce H., Sr., Public Member Interlochen	6/30/10
Armstrong, Reginald, Public Member Detroit	6/30/10
Auty, Earl, R.N., C.R.N.A. Grosse Pointe Park	6/30/09
Bowman, Karen A., R.N. Lansing	6/30/09
Breslin, Jeffrey H., R.N. Dansville	6/30/11
Brown, Mary J., R.N. Dimondale	6/30/11
Bugbee, Nina A., R.N. Flushing	6/30/09
Childress, James H., Public Member Grand Rapids	6/30/10
Cole, Terese, Public Member Flint	6/30/10
Daley, Melynda J., L.P.N. Marquette	6/30/12

Johnson, Michelle M., R.N., M.S.N. Marquette	6/30/12
Kulwicki, Anahid, R.N., M.S.N., Ph.D. Troy (resigned 11/2/08)	6/30/11
Lavery, Kathleen, R.N., M.S., C.N.M. Jackson	6/30/09
Lewis, Brenda, L.P.N. Chase	6/30/11
MacEachern, Mary, L.P.N. Cadillac	6/30/09
Perry, Amy M., R.N., M.S.N. Ann Arbor	6/30/09
Schultz, LaDonna, Public Member West Branch	6/30/10
Stubbs, Donica, R.N., B.S.N. Inkster	6/30/12
Weissler, Jody, Public Member Lansing	6/30/11
Woods, Michelle, Public Member Jackson	6/30/10

**Schedule of Board Meetings
Fiscal Year 2008/2009**

October 1, 2008 (DSC only)
November 5, 2008 (DSC only)
November 6, 2008
December 3, 2008 (DSC only)
January 6, 2009 (DSC only)
January 7, 2009
February 4, 2009 (DSC only)
March 4, 2009 (DSC only)
March 5, 2009
April 1, 2009 (DSC only)
May 6, 2009 (DSC only)
May 7, 2009
June 3, 2009 (DSC only)
June 4, 2009
July 1, 2009 (DSC only)
August 5, 2009 (DSC only)
September 2, 2009 (DSC only)
September 3, 2009

Licensing Activity

Registered Nurses

Applications Received	6,834
Examinations Authorized	5,229
Number of Licensees	129,978

Registered Nurses – Provisional

Applications Received	175
Examinations Authorized	
Number of Licensees	85

R.N. Specialty Certifications

Anesthetists

Applications Received	146
Number of Certifications	2,354

Midwives

Applications Received	17
Number of Licensees	310

Practitioners

Applications Received	272
Number of Licensees	3,688

Practical Nurses

Applications Received	2,166
Examinations Authorized	1,733
Number of Licensees	27,579

Random Continuing Education Audits

Practical Nurses

Audited	40
Complied	30

Registered Nurses

Audited	194
Complied	105

Nurse Anesthetists

Audited	26
Complied	24

Nurse Midwives

Audited	7
Complied	4

Nurse Practitioners

Audited	43
Complied	40

Renewal Continuing Education Audits

Audited	113
Complied	111

Regulatory Activity

Allegations Received	1,143
Administrative Investigations	1,645
Field Investigations Authorized	355
Field Investigations Completed	260
Administrative Complaints Filed	371
Summary Suspensions Filed	48
Cease and Desist Orders Issued	0

Board Disciplinary Actions

Reprimand	6
Probation	156
Fine	18
Voluntary Surrender	4
Limited License	8
Suspension	132
Revocation	1
Total Disciplinary Actions	325

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
Pleasant, Geraldine, Public Member, Vice Chair Grand Blanc	6/30/06
Messick, Karen J., N.H.A. Comstock Park	6/30/10
Meyer, Thomas D., N.H.A. East Tawas	6/30/09
Moon, Valaria Conerly, Public Member Flint	6/30/12
Pettis, Susan E., N.H.A. Ann Arbor	6/30/12
Shaheen, Samuel, D.O. Saginaw	6/30/09
Vacant, Professional Member	
Vacant, Public Member	

Schedule of Board Meetings

Fiscal Year 2008/2009

- October 16, 2008
- January 15, 2009 (cancelled)
- April 23, 2009 (cancelled)
- July 23, 2009 (cancelled)

Licensing Activity

Applications Received	138
Examinations Authorized	107
Number of Licensees	1,242

Regulatory Activity

Allegations Received	68
Administrative Investigations	16
Field Investigations Authorized	17
Field Investigations Completed	7
Administrative Complaints Filed	4
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0

Board Disciplinary Actions

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

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.

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.

Board Members	Term Expires
Conti, Gerry E., M.S., O.T.R., Chair Ypsilanti	12/31/09
Andert, Diane K., O.T.R., Vice Chair Battle Creek	12/31/09
Clipper, Christie, Public Member Taylor	12/31/09
Hemphill, Barbara, O.T.R. Kalamazoo (resigned 4/31/09)	12/31/10
Miller, John D., Public Member Lansing	12/31/07
Robosan-Burt, Susan, O.T.R. Troy	12/31/09
Sisco, William M., M.A., M.S., O.T.R. Holt	12/31/12
Smith, Grace, Public Member Rockford	12/31/09
Vacant, Public Member	

The following appointment was made on 1/6/09:

Polk, LoRon, Public Member Canton (replaced Gaven)	12/31/09
---	----------

The following appointment was made on 6/26/09:

Lenfield, Britt, O.T.R. Ada (replaced Hemphill)	12/31/10
--	----------

Schedule of Board Meetings

Fiscal Year 2008/2009

December 1, 2008 (cancelled)

February 3, 2009

April 7, 2009

August 18, 2009

Registration Activity

Occupational Therapists

Applications Received	184
Number of Registrants	4,521

Occupational Therapy Assistants

Applications Received	116
Number of Registrants	1,221

Regulatory Activity

Allegations Received	14
Administrative Investigations	16
Field Investigations Authorized	7
Field Investigations Completed	4
Administrative Complaints Filed	3
Summary Suspensions Filed	1
Cease and Desist Orders Issued	1

Board Disciplinary Actions

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

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
Darin, Frederick P., O.D., Chair Charlotte	6/30/10
Lakin, Donald W., O.D., Vice Chair Clinton Township	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	6/30/10
McClintic, David C., O.D. Portage	6/30/12
Motherwell, Winifred, Public Member Haslett	6/30/11
Thompson, Stephen P., O.D. East Lansing	6/30/10
Zair, Kays T., Public Member West Bloomfield	6/30/10

Schedule of Board Meetings

Fiscal Year 2008/2009

November 19, 2008

February 18, 2009

May 27, 2009

August 19, 2009

Licensing Activity

Applications Received	53
Number of Licensees	1,587

Specialty Certifications

DPA Certification

Number of Certifications	1,505
--------------------------	-------

TPA Certification

Number of Certifications	1,465
--------------------------	-------

Random Continuing Education Audits

Audited	45
Complied	35

Renewal Continuing Education Audits

Audited	25
Complied	25

Regulatory Activity

Allegations Received	14
Administrative Investigations	20
Field Investigations Authorized	4
Field Investigations Completed	4
Administrative Complaints Filed	5
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0

Board Disciplinary Actions

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

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
Vanator, Douglas P., D.O., Chair Olivet	12/31/12
Acker, Steven A., D.O., Vice Chair Ann Arbor	12/31/09
Carney, Kathleen M., Public Member Brighton	12/31/12
Cunningham, William C., D.O. Grand Rapids	12/31/10
Dobritt, Dennis W., D.O. Bloomfield Hills	12/31/10
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	12/31/09
Kelly, Charles E., D.O. Ortonville	12/31/10
Lindberg, Paulette J., Public Member Marquette	12/31/11
Mustonen, Sylvia G., D.O. Okemos	12/31/10

**Schedule of Board Meetings
Fiscal Year 2008/2009**

October 2, 2008
November 20, 2008
February 5, 2009
April 2, 2009
June 2, 2009
August 6, 2009

Licensing Activity

Doctors of Osteopathic Medicine

Applications Received 359
Number of Licensees 6,697

Clinical Academic DO's

Applications Received 0
Number of Licensees 0

Educational Limited DO's

Applications Received 447
Number of Licensees 1,042

Special Volunteer DO's

Applications Received 0
Number of Licensees 1

Renewal Continuing Education Audits

Audited 55
Complied 55

Regulatory Activity

Allegations Received 256
Administrative Investigations 296
Field Investigations Authorized 87
Field Investigations Completed 66
Administrative Complaints Filed 49
Summary Suspensions Filed 3
Cease and Desist Orders Issued 0

Board Disciplinary Actions

Reprimand 0
Probation 11
Fine 8
Voluntary Surrender 2
Limited License 3
Suspension 5
Revocation 1
Total Disciplinary Actions 30

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
Bach, David, R.Ph., Chair West Bloomfield	6/30/11
Shaw, Laura, R.Ph., Vice Chair Waterford	6/30/09
Carlson, Dale, Public Member Ferndale	6/30/10
Collins, Gwenesia, R.Ph. Sterling Heights	6/30/11
Fakhoury, Sara A., R.Ph. Troy	6/30/12
Farida, Suhair, R.Ph., West Bloomfield	6/30/11
Gnodtke, Pamela, Public Member Charlevoix	6/30/10
Kegerreis, Leigh, Public Member Monroe	6/30/09

Rivet, Edward L., Public Member Bay City (resigned 12/2/08)	6/30/11
Schmidt, Harvey E., R.Ph. Tecumseh	6/30/10
Senneker, Devin R., Public Member Comstock Park	6/30/10
The following appointment was made on 6/26/09:	
Hartman-Abramson, Ilene, Ph.D. (replaced Rivet) Novi	6/30/11
The following appointments were made on 7/1/09:	
Almaklani, Dhafer A., R.Ph. (replaced Shaw) Dearborn	6/30/13
Bufe-Wyett, Pamela L., Public Member Bloomfield Hills (replaced Kegerreis)	6/30/13

**Schedule of Board Meetings
Fiscal Year 2008/2009**

October 8, 2008
December 10, 2008 (full board only)
December 15, 2008 (DSC only)
February 11, 2009
April 8, 2009
June 10, 2009
August 12, 2009

Licensing Activity

Pharmacists

Applications Received	505
Examinations Authorized	
NAPLEX	580
MPJE	740
Number of Licensees	12,931

Educational Limited Pharmacists

Applications Received	432
Number of Licensees	1,458

Other Licenses

Applications Received	
New Pharmacies	259
Manufacturer/Wholesaler	148
Number of Licensees	
Pharmacy	3,044
Manufacturer/Wholesaler	1,002

Random Continuing Education Audits

Audited	175
Complied	147

Renewal Continuing Education Audits

Audited	60
Complied	59

Regulatory Activity

Allegations Received	218
Administrative Investigations	481
Field Investigations Authorized	91
Field Investigations Completed	97
Administrative Complaints Filed	112
Summary Suspensions Filed	11
Cease and Desist Orders Issued	0

Board Disciplinary Actions

Reprimand	6
Probation	39
Fine	21
Voluntary Surrender	1
Limited License	10
Suspension	17
Revocation	2
Total Disciplinary Actions	96

Pharmacy Inspections

New Store Apps	366
Transfer Apps	76
Relocation Apps	81
Licensing Apps	523
Probation/Monitoring	2
Random	142

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 therapy 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.

The Michigan Board of Physical Therapy consists of 9 voting members: 5 physical therapists and 4 public members.

Board Members	Term Expires
Perry, David W., P.T., Chair Grosse Pointe Woods	12/31/11
Mostrom, Elizabeth, P.T., Vice Chair Grand Rapids	12/31/11
Crockett, Mecha, Public Member Lansing	12/31/09
Kumar, Vijay, P.T. West Branch	12/31/08
Maes, Sandra, Public Member Harrison Township	12/31/09
Marlan, Jill A., P.T. Mason	12/31/09
May, Andrew G., P.T. Lansing	12/31/09
Thomas-Pilarczyk, Linda, Public Member Parma	12/31/11
Vacant, Public Member	

Schedule of Board Meetings

Fiscal Year 2008/2009

- October 7, 2008
- January 20, 2009
- April 21, 2009
- August 25, 2009

Licensing Activity

Physical Therapists

Applications Received	1,286
Examinations Authorized	1,221
Number of Licensees	8,876

Physical Therapist Assistants

Applications Received	118
Examinations Authorized	
Number of Licensees	0

Regulatory Activity

Allegations Received	35
Administrative Investigations	41
Field Investigations Authorized	11
Field Investigations Completed	6
Administrative Complaints Filed	4
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0

Board Disciplinary Actions

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

Rules Changes

2008-010 CH

Filed with the Great Seal May 15, 2009

Effective May 15, 2009

Rule 338.7101

Rule amended to delete the definition of "completed a physical therapist educational program acceptable to the board" and added definitions for "intervention" and "patient or client of record."

Rule 338.7102

Rule amended to delete provisions on the renewal of a prescription by a physician; add new language defining "prescription," specify information to be included on a prescription, and increase the number of days that a prescription for physical therapy is valid.

Rule 338.7103

Rule amended to delete the cap on the amount of fine that may be assessed for each violation of the Public Health Code committed by a licensee. Language also revised for clarity.

Rule 338.7104

Rule amended to update the reference to the standards for accreditation of physical therapy programs.

Rule 338.7105

Rule amended to add references to two new rules.

Rule 338.7107

Rule amended to delete the examination eligibility requirements for graduates of both U.S. programs and foreign programs. These provisions codified into new rules. The rule also updates the language on approval of the licensure examination and provides for the adoption of the exam by the Board.

Rule 338.7107a

New rule stipulating examination requirements.

Rule 338.7107b

New rule stipulating examination requirements for graduates of foreign programs.

Rule 338.7108

Rule rescinded. The rule allowed applicants to retake the licensing examination without limitation.

Rule 338.7110

Rule amended to clarify the requirements for licensure by endorsement.

Rule 338.7111

A new rule to codify the requirements for relicensure.

Rule 338.7112

A new rule to stipulate the requirements for delegations of physical therapy services to unlicensed individuals and to stipulate supervision requirements.

Rule 338.7113

New rule stipulating prohibited conduct of licensed physical therapists.

Rule 338.7114

New rule requiring maintenance of patient records.

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 consists of 11 voting members: 5 physician's assistants, 1 physician member from each of the Boards of Medicine, Osteopathic Medicine and Surgery and Podiatric Medicine and Surgery, and 3 public members.

Task Force Members	Term Expires
Fenn, William H., P.A.-C, Chair Kalamazoo	12/31/09
O'Brien, Bernard J., P.A.-C, Vice Chair Alpena	12/31/11
Acker, Steven A., D.O. Ann Arbor	12/31/09
Davis, Michael A., P.A.-C Harbor Beach	12/31/11
Hernandez, Rene L., P.A.-C Alma	12/31/11
Lepird, Sherry L., Public Member Portage	12/31/11
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
Vacant, Public Member	
Vacant, Podiatrist Professional Member	

Schedule of Joint Task Force Meetings

Fiscal Year 2008/2009

October 21, 2008

January 13, 2009

April 28, 2009 (DSC only)

July 28, 2009

Licensing Activity

Applications Received	246
Number of Licensees	3,394

Regulatory Activity

Allegations Received	38
Administrative Investigations	57
Field Investigations Authorized	13
Field Investigations Completed	7
Administrative Complaints Filed	12
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0

Joint Task Force Disciplinary Actions

Reprimand	0
Probation	2
Fine	2
Voluntary Surrender	0
Limited License	2
Suspension	4
Revocation	1
Total Disciplinary Actions	11

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 and 4 public members.

Board Members	Term Expires
Scott, Tara L., D.P.M., Chair Southfield	6/30/11
Seiler, Richard M., D.P.M., Vice Chair Holland	6/30/09
Blackledge, Christine, Public Member Traverse City	6/30/11
Gee, Lily, Public Member Haslett	6/30/09
Geller, Louis, D.P.M. Huntington Woods	6/30/10
Hughes, Scott, D.P.M. Monroe	6/30/10
Kezelian, Harry A., D.P.M. Bloomfield Hills	6/30/09
Mills, Raymond, Public Member Bellaire	6/30/10
Morris, Charles, Public Member Wyandotte	6/30/10

Schedule of Board Meetings

Fiscal Year 2008/2009

October 15, 2008

January 21, 2009

April 15, 2009 (cancelled)

July 22, 2009 (cancelled)

Licensing Activity

Podiatrists

Applications Received	37
Examinations Authorized	7
Number of Licensees	768

Educational Limited Podiatrists

Applications Received	29
Number of Licensees	56

Renewal Continuing Education Audits

Audited	17
Complied	17

Regulatory Activity

Allegations Received	110
Administrative Investigations	27
Field Investigations Authorized	13
Field Investigations Completed	8
Administrative Complaints Filed	2
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0

Board Disciplinary Actions

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

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 and 4 public members.

Board Members	Term Expires
Ver Merris, Dane K., Ed.D., Chair Grand Rapids	12/31/12
Cowie, Julie, Public Member, Vice Chair 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
Warbelow, Alan, L.L.P. Plymouth	12/31/11

Schedule of Board Meetings

Fiscal Year 2008/2009

- November 13, 2008
- January 22, 2009
- March 19, 2009
- May 21, 2009
- July 16, 2009
- September 10, 2009

Licensing Activity

Applications Received	539
Examinations Authorized	119
Number of Licensees	
Psychologists	2,826
Doctoral Limited	234
Masters Limited	3,605
Temporary Limited	412

Regulatory Activity

Allegations Received	93
Administrative Investigations	110
Field Investigations Authorized	30
Field Investigations Completed	36
Administrative Complaints Filed	20
Summary Suspensions Filed	3
Cease and Desist Orders Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	5
Fine	5
Voluntary Surrender	1
Limited License	2
Suspension	2
Revocation	0
Total Disciplinary Actions	15

Rule Changes

Rule # 2009-002 CH
Filed with the Great Seal on May 14, 2009
Effective May 14, 2009

Rule 338.2511

Rule amended to extend the deadline by which doctoral programs in psychology are required to have APA accreditation or National Register designation.

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 consists of 7 voting members: 4 respiratory therapists, 1 medical director and 2 public members.

Board Members	Term Expires
Kehr, Randall M., R.T., Chair Grandville	12/31/08
Berry, James R., Jr., R.T., Vice Chair Detroit	12/31/09
Barrett, Malita L., Public Member Detroit	12/31/08
Haas, Carl, L.R.T. Ann Arbor	12/31/11
Mutch, Kathleen, Public Member Novi	12/31/10
Rinck, John, L.R.T. Eaton Rapids	12/31/09
Sprague, Frank R., M.D. Muskegon	12/31/11

The following appointment was made on 12/2/08:

Abramson, Ilene, Public Member Novi (replaced Barrett)	12/31/10
---	----------

Schedule of Board Meetings

Fiscal Year 2008/2009

November 7, 2008
February 20, 2009
May 15, 2009
August 21, 2009

Licensing Activity

Applications Received	337
Number of Licensees	4,718

Regulatory Activity

Allegations Received	18
Administrative Investigations	25
Field Investigations Authorized	7
Field Investigations Completed	2
Administrative Complaints Filed	3
Summary Suspensions Filed	2
Cease and Desist Orders Issued	0

Disciplinary Actions

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

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	2
Number of Registered Sanitarians	535

Regulatory Activity

Allegations Received	0
Administrative Investigations	0
Field Investigations Authorized	0
Field Investigations Completed	0
Administrative Complaints Filed	0
Summary Suspensions Filed	0

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 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
Stanislaw, David, L.M.S.W., Chair Birmingham	12/31/08
Najor-Durack, Anwar, L.M.S.W., Vice Chair West Bloomfield	12/31/11
Calery, Ronald, L.M.S.W. Sault Ste. Marie	12/31/11
Curran, Carolyn, Public Member East Lansing	12/31/11
Cushingberry, Allen L., Psy.D. West Bloomfield	12/31/09
McFadden, Emily Jean, L.M.S.W. Holland	12/31/10
Munson, Dara, Public Member West Bloomfield	12/31/10
Semonian, Alan T., Public Member Southfield	12/31/09
Wojack, Matthew, L.M.S.W. Lansing	12/31/09

The following appointments were made on 3/17/09:

Battles, Merry, L.M.S.W. Kalamazoo (replaced Stanislaw)	12/31/12
--	----------

Bell, Heather Adams, Public Member
Grand Rapids (replaced Curran)

12/31/12

**Schedule of Board Meetings
Fiscal Year 2008/2009**

November 25, 2008
January 27, 2009
March 24, 2009
May 12, 2009
July 21, 2009
September 22, 2009

Licensing Activity

Master's Social Workers

Applications Received	567
Examinations Authorized	715
Number of Licensees	14,308

Limited Master's Social Workers

Applications Received	817
Number of Licensees	3,445

MSW Specialty Certifications

Macro Specialty

Applications Received	4
Number of Certifications	12,931

Clinical Specialty

Applications Received	12
Number of Certifications	14,043

Bachelor's Social Workers

Applications Received	76
Examinations Authorized	94
Number of Licensees	5,581

Bachelor's Limited Social Workers

Applications Received	209
Number of Licensees	656

Social Service Technicians

Applications Received	140
Number of Registrants	1,777

Social Services Limited Technician

Applications Received	17
Number of Registrants	22

Random Continuing Education Audits

Audited	178
Complied	128

Renewal Continuing Education Audits

Audited	73
Complied	70

Regulatory Activity

Allegations Received	102
Administrative Investigations	140
Field Investigations Authorized	50
Field Investigations Completed	49
Administrative Complaints Filed	21
Summary Suspensions Filed	3
Cease and Desist Orders Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	5
Fine	0
Voluntary Surrender	0
Limited License	7
Suspension	13
Revocation	1
Total Disciplinary Actions	26

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.

The following appointments were made on 6/26/09:

Board Members	Term Expires
Austin, Brit, CCC-SLP Oxford	12/31/10
Brown-Clarke, Judith, Ph.D., Public Member Lansing	12/31/13
Eldis, Francis, CCC-A/SLP Redford	12/31/10
Fairbrother, Ellen, CCC-SLP Southfield	12/31/11
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
Strong, Katie, CCC-SLP East Lansing	12/31/11
Weise, Timothy, CCC-SLP Grosse Ile	12/31/13
Vacant, Professional Member	

Schedule of Board Meetings Fiscal Year 2008/2009

None held this fiscal year

Licensing Activity

No licensing activity yet

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 Fowlerville	12/31/10
Letsche, Lawrence A., D.V.M., Vice Chair Plymouth	12/31/09
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
Paulson, Harold Jr., Public Member Fruitport (resigned 3/8/09)	12/31/09
Postorino-Reeves, Nancy, D.V.M. East Lansing	12/31/12
Rohwer, Christopher, D.V.M. Kalamazoo	12/31/10
Stitt, Amanda, Public Member Lansing	12/31/11

Schedule of Board Meetings

Fiscal Year 2008/2009

October 23, 2008

December 11, 2008

January 29, 2009

March 26, 2009

May 28, 2009

August 27, 2009

Licensing Activity

Veterinarians

Applications Received	161
Number of Licensees	3,727

Clinical Academic Veterinarians

Applications Received	13
Number of Licensees	79

Educational Limited Veterinarians

Applications Received	0
Number of Licensees	1

Veterinary Technicians

Applications Received	196
Examinations Administered	200
Number of Licensees	2,291

Regulatory Activity

Allegations Received	65
Administrative Investigations	100
Field Investigations Authorized	26
Field Investigations Completed	20
Administrative Complaints Filed	13
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0

Board Disciplinary Actions

Reprimand	1
Probation	7
Fine	1
Voluntary Surrender	0
Limited License	1
Suspension	1
Revocation	0
Total Disciplinary Actions	11

Additional Rule Promulgation Activity

Bureau of Health Professions General Rules

2008-003 CH

Filed with the Great Seal May 15, 2009

Effective May 15, 2009

Rule 338.7001

Deleted outdated provisions for renewal dates; added definitions for “CMS,” “code,” “department,” and “Stark law.”

Rule 338.7001a

A new rule stipulating the professions that are licensed biennially and their expiration dates.

Rule 338.7002

Rule amended to stipulate the professions that are licensed triennially and their expiration dates.

Rule 338.7003

A new rule adopting current Stark law provisions.

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.

As of September 30, 2009, our office had received 6,998 applications. There were 4,398 patient cards issued and 1,763 caregivers approved.

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

Rules Change

Rule #2008-051 CH

Filed with the Great Seal on March 27, 2009

Effective April 4, 2009

These rules implemented Initiated Law 1 of 2008, which provides for the legal use of medical marihuana.

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 Director of the Department of Community Health appoint members in accordance with Section 16165 of the Michigan Public Health Code.

Schedule of Committee Meetings

Fiscal Year 2008/2009

December 15, 2008

March 16, 2009

June 15, 2009

September 21, 2009

Member Appointed By	Term Expires
Newman, Charles H., R.Ph., Chair Board of Pharmacy	12/31/09
Christensen, Carl, M.D., Ph.D., Vice Chair Board of Medicine	12/31/11
Barna, Mary E., D.P.M. Board of Podiatric Medicine & Surgery	12/31/09
Bender, Dean A., M.A., D.C. Board of Chiropractic	12/31/09
Black, R. Elizabeth, P.T., M.S. Board of Physical Therapy	12/31/09

Crain, Jo Anne, Ph.D., O.T.R. Board of Occupational Therapists	12/31/09
Foley, Mary K., R.N. Board of Nursing	12/31/10
Hall, Steven C., R.S. Represents Sanitarians	12/31/08
Hamick, Steven K., R.R.T. Board of Respiratory Care	12/31/10
Kelley, Bobbe J., D.O. Board of Osteopathic Medicine & Surgery	12/31/10
Kronquist, Mary P., M.M. Public Member	12/31/10
Lewis, Joan M., D.D.S. Board of Dentistry	12/31/09
McQuiddy, Merry, J.D. Public Member	12/31/09
O'Connor, Mary, L.M.S.W. Board of Social Work	12/31/09
O'Handley, Patricia, D.V.M. Board of Veterinary Medicine	12/31/09
Rolston, Steve, N.H.A. Board of Nursing Home Administrators	12/31/09
Rosen, Seymour R., O.D. Board of Optometry	12/31/10
Vivian, Lynda Z.B., PA-C Task Force on Physician's Assistants	12/31/09
Walkons, Christine, L.P.C. Board of Counseling	12/31/09
Vacant Board of Acupuncture	
Vacant Board of Athletic Trainers	
Vacant Board of Audiology	
Vacant Board of Dietetics & Nutrition	
Vacant Board of Massage Therapy	
Vacant Board of Speech-Language Pathology	

Ex-Officio Members

Brim, Melanie B., Ex-Officio, Bureau of Health Professions
Representing Department Director
Bushong, Susan M., L.B.S.W., A.C.C., Outreach Coordinator
Bureau of Health Professions
Garza, Ray R., Contract Administrator
Bureau of Health Professions

The following appointment was made on 1/23/09:

Creighton, Nancy, LMFT	12/31/11
Board of Marriage & Family Therapy	

The following appointment was made on 9/10/09:

Berkman, Arnold S., PhD	12/31/09
Board of Psychology	

Accomplishments

- The Committee continues to review the HPRP policies and procedures to identify potentially needed changes to ensure accurate monitoring.
- Policies regarding Pain Management, Ethylgtucarmide (Etg) testing, Mental Health, Anesthesia Professionals and Medical Marijuana are being considered for inclusion.
- The HPRP Outreach Worker continues to provide educational and outreach efforts for the program, statewide, to hospitals and other treatment facilities as well as educational facilities for persons seeking licensure.
- A database continues to be upgraded for use by the contractor, to assist with monitoring program participants. The program includes a “tickler” system to more quickly identify any issue of non-compliance.
- The HPRP website, www.hprp.org, continues to be updated 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
Elkins, Sarah Public Member	8/30/09
Smith, Dennis 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
- Friedman, Leo, Division Chief, Licensing & Regulation Division
Department of Attorney General
- Perri, Giovannino, M.D., 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

Schedule of Commission Meetings

Fiscal Year 2008/2009

October 22, 2008 (cancelled)

January 20, 2009

April 21, 2009

July 21, 2009 (cancelled)

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. The pharmacy reporting format requirement was enhanced to ASAP 2005 (American Society for Automation in Pharmacy). In addition to enhanced reporting technology, the ASAP 2005 version will allow users to view the method of payment used by patients listed on a MAPS report.

Prescribers can query the MAPS database, upon registration to MAPS Online, 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.

MCL 333.7333a also allows direct access to MAPS data by law enforcement agencies in Michigan only for bona fide drug-related criminal investigatory or evidentiary purposes.

The system is currently providing almost 1,300 reports daily to practitioners, pharmacists, and law enforcement agencies. There are approximately 12,000 MAPS users, which is approximately 20% of the licensed health professionals in Michigan. MAPS administrators along with the Michigan Pain Management Program are currently producing a DVD to promote the use of MAPS along with guidelines for effective pain management.

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. This process may also encourage practitioners to register with MAPS so they may monitor their patients' controlled substance history on a continued basis. MAPS reports also identifies the honest patients and allows prescribers to provide effective pain relief for these patients with conditions relating to chronic and end of life pain.

A total of 17,761,231 prescriptions were reported to MAPS in 2009. Hydrocodone combinations such as Vicodin, Norco, Lorcet and Lortab accounted for 5,337,518 prescriptions or 30% of the total number dispensed.

The contract with HTC Global Services ended in September 2009, at which time HTC Global Services granted to the State of Michigan, all rights to the MAPS program system. HTC has provided a full-time programmer under a new two-year contract to facilitate the full transition of the MAPS system to MDIT. 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 pain management, patient safety and E-health practices. Professions surveyed to date include nurses, physicians, physician residents, dentists, dental hygienists, pharmacists and physician's assistants.
- 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.
- Patient Safety website (www.michigan.gov/patientsafety) that provides information for health professionals and the general public related to patient safety issues.
- Publishes 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.
- Provides administrative support and guidance for two special committees: the Advisory Committee on Pain and Symptom Management (ACPSM) and the Interagency Healthcare Workforce Coordinating Council (IHWCC).

Advisory Committee on Pain and Symptom Management

The Advisory Committee on Pain and Symptom Management was originally created in April 1999. The Committee completed its charge of making recommendations to the legislature in 2002. In May 2006, a new Committee was appointed to oversee the recommendations of the prior committee and consider new recommendations regarding pain and symptom management issues that have arisen since 2002. Appointments to the Committee are by designated licensing Boards or the Governor.

The Committee has developed a Pain and Symptom Management website (www.michigan.gov/pm) that provides in-depth information for health professionals, the general public, patients, families and advocates. Information for professionals includes state and national guidelines, 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 and recommendations, palliative care, helpful resources and databases, and links to news reports about pain and symptom management.

Another activity of the Committee includes the promotion of the MAPS programs to all prescribers through print and electronic media. The Committee has also been instrumental in the distribution of the **Responsible Opioid Prescribing: A Physicians Guide** to as many of our licensed prescribers as possible.

The Committee members are:

Member	Term Expires
Representing/Appointed By	
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
Chafy, 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
Roskos, Steven E., M.D. Michigan State University, College of Human Medicine	6/30/11
Prokop, Lawrence L., D.O. Michigan State University, College of Osteopathic 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

Interagency Healthcare Workforce Coordinating Council

The Interagency Healthcare Workforce Coordinating Council (IHWCC) is composed of representatives from the Office of the Governor, Michigan Department of Community Health, Michigan Department of Corrections, Michigan Department of Education, Michigan Department of Energy, Labor & Economic Growth, Michigan Department of Human Services, and the Michigan Health Council. The Department of Community Health provides oversight for the Michigan Healthcare Workforce Center. To assist the Department of Community Health in assuring that the Center is useful to the public, the four departments established the IHWCC. The IHWCC serves in an advisory capacity to the Department of Community Health.

The Michigan Healthcare Workforce Center (www.michigan.gov/mhwc) will:

- Serve as a clearinghouse for workforce data
- Administer surveys to licensed health professionals
- Convene and/or participate with groups to address workforce issues
- Conduct research and publish papers on workforce related issues

Healthcare Workforce Committee Activity
Additional Workforce Related Activities

Michigan Center for Health Professionals

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
- Identify existing data sources and determine whether there are gaps in the data
- Collect additional information in order 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

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 consensus 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