## **GUAM BOARD OF MEDICAL EXAMINERS**

Wednesday, March 12 (Reconvened on March 19), 2025 at 4:00 pm

Join Zoom Meeting:

https://us06web.zoom.us/j/89991772551?pwd=9zEHr4ZfcmFJtCC4N2XCtAXNw9KmPM.1

Meeting ID: 899 9177 2551

Passcode: 297553

## MINUTES

Торіс		DECISION(S) / ACTION(S) MADE		Responsible Party		Status
I.	Call to Order	Meeting Chaired by: Dr. Berg		Chair	1636	Called to Order
		<ul> <li>A. Roll Call: GBME <u>Present at HPLO</u></li> <li>⊠Verrad Kwai Nyame, Medical Director of GMH <u>Present Virtually at Remote location:</u></li> <li>⊠ Nathaniel B. Berg, M.D., Chairperson</li> <li>□Luis G. Cruz, M.D., Secretary</li> <li>⊠Alexander D Wielaard, M.D., Treasurer</li> <li>⊠ Joleen Aguon, M.D., Vice-Chairperson</li> </ul>	OTHERS PRESENT: <u>Present at HPLO Conference Room:</u> Baltazar (Tre) Hattori III, HPLO <u>Present Virtually at Remote location:</u> Breanna Sablan, HPLO	Chair	1636	Quorum Established
		<b>B.</b> Confirmation of Public Notice Dr. Berg reviewed and found it to be in conforman	ce with current laws.	Chair	1637	Confirmed
II.	Adoption of Agenda	Motion to Adopt the Agenda: Dr. Berg.		GBME	1637	Adopted
III.	Review and Approval of Minutes	Draft Minutes dated 02/21/2025 Motion to Approve: Dr. Berg.		GBME	1637	Unanimously Approved
IV.	Treasurer's Report	No Report		GBME	1638	No Report
V.	HPLO Administrator's Report	<ul> <li>B. Sablan reminded board members to submit their Disclosure of Conflict-of-Interest forms to the Guam Election Commission by April 22, 2025. She clarified that this submission needs to be done annually, and the forms could be sent via email to forward to the Election Commission. Board members were asked to forward their disclosures via email or WhatsApp once completed.</li> <li>Dr. Berg discussed that he and B. Sablan are working to establish official Guam emails for board members, as opposed to using personal Gmail accounts. The goal was to enhance professionalism and ensure that communication appears</li> </ul>		HPLO	1638	Noted

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		more official, with addresses ending in ". gov.gu." He noted that other boards may currently be using personal emails, and suggested that an inquiry be made to determine if other boards use official emails. If the response is negative, a letter might be sent to the governor's office requesting a system to provide official emails for each board. The aim was to ensure transparency in communications and streamline official correspondence, making it easier for records to be accessed without the need for subpoenas or other formal processes.			
VI.	Chairperson's Report	<ul> <li>Dr. Berg highlighted the FSMB meeting as an upcoming event, with preparations underway. Dr. Nyame was reminded of an outstanding letter that would be sent out within the next day or two. It was confirmed that multiple board members would attend the FSMB meeting, marking the first time that more than one member from the board would be present. A meeting had already been set up to introduce the group to the incoming president of FSMB, and the board was pleased to have a larger representation this year. Dr. Berg focused on the importance of collaboration, with the idea that a strong, unified presence would increase the board's influence during discussions. The possibility of joining a committee was also encouraged, as participating in these smaller subgroups could amplify the board's voice and ensure Guam's concerns are better heard. This approach aimed to create a broader impact like that of other smaller states like North Carolina and Arizona, which are able to influence FSMB decisions despite their size. Dr. Berg emphasized the importance of this active participation for increasing Guam's visibility and influence at the national level.</li> <li>Dr. Berg included a reminder for members to submit their itineraries to ensure potential compensation if available. Additionally, it was noted that Dr. Berg, B. Sablan and Dr. Aguon would begin working on a thorough review process for licensure, revisiting each step in detail. The goal was to ensure that all licenses were reviewed more thoroughly before being presented to the board, with specific items such as a cover sheet, checkboxes, and confirmation that discrepancies—such as mismatched names or issues with the FCVS—had been addressed prior to submission. Dr. Berg emphasized the need for clearer, step-by-step instructions for reviewing licenses, like processes used by smaller boards, where pre-screening was done more rigorously.</li> </ul>	Dr. Berg	1640	Noted
VII.	Old Business	<ul> <li>A. Complaint(s): Two complaints were discussed, but no action could be taken at the moment as both were pending responses from the Attorney General's Office. The board was waiting for the Attorney General's Office to provide an opinion on the matters. Additionally, Dr. Cruz, who could have provided an update on one of the complaints, was unavailable for the meeting. Dr. Berg noted that unless Dr. Cruz had personally received a response from the Attorney General's Office, there was nothing further to address regarding these two complaints at this time.</li> <li>1. GBME-CO-20-005 – Received: 09/18/2020.</li> <li>2. GBME-CO-2022-010 – Received: 06/21/2022.</li> <li>B. Accusation: GBME-001-2023</li> </ul>	Dr. Cruz B. Hattori GBME	1644	Awaiting Response from OAG In Progress In Progress In Progress

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		<b>B.</b> Hattori discussed the matter of awaiting all of the board to review the relevant file. Dr. Berg noted that not all necessary information had been gathered yet, so no further action could be taken at that time. The board agreed to revisit the issue once the file was fully reviewed.			
		C. Application(s) for Limited Licensure:			
		1. Christian Soeharsono	GBME		Awaiting
		Dr. Berg stated corrections had been requested last month for this application. However, since the			Corrected
		corrected application has not been received yet, no further action could be taken at this time.			Application
		D. Seeking Guidance on Laboratory Orders for Patients Temporarily in Guam with Mainland Providers:			
		1. Guidance is needed on whether laboratory orders from a mainland primary care provider (PCP)	GBME		Noted.
		assuming the PCP is not licensed to practice in Guam and the patient is not seeing a provider in Guam			Awaiting Report from
		— can be accepted and honored for service in Guam. The board is awaiting input from other boards regarding laboratory matters. Once the other boards meet and			Other Boards
		provide their opinions, B. Sablan and B. Hattori will share the information with the board, to allow a unified			
		decision, as the issue affects multiple boards simultaneously.			
VIII	New Business	B. Application for Full Licensure:		1653	
		1. Lindsey J. Fields Minshew	GBME		Unanimously
		Dr. Berg noted the application in question was deemed generally complete and verified, with the			Conditionally
		individual having attended medical school, completed residency training, and maintained a clean			Approved
		National Practitioner Data Bank record. She was also set to do locum radiology work for SDA for a			
		few months. However, an issue arose with discrepancies in her name, particularly in the application			
		submitted by SDA, which listed an incorrect middle name. While the FCVS data mostly matched her			
		passport, the board noted that FCVS does not verify name accuracy, as it only ensures the medical			
		school and basic credentials are correct. The board emphasized the importance of having accurate			
		information on government-issued documents like licenses. It was decided that the application would			
		be returned for corrections, with the individual needing to submit letters to FCVS to address the name			
		discrepancy before the board could proceed with issuing the license.			
		Motion to Approve Pending Submission of Letter to FCVS: Dr. Berg:2 <sup>nd</sup> : Dr. Nyame.			

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	<ul> <li>Martha H. Garrison         The issue of name discrepancies was further discussed, specifically regarding Dr. Garrison, who has multiple variations of her name, including "Martha Jane Garrison" and "Martha Garrison." It was emphasized that precision in name matching is critical, as even small discrepancies could cause confusion. The board clarified that such attention to detail was not about being overly strict, but about ensuring that the name on official documents, like licenses, exactly matches the individual's government-issued identification, such as a passport. Dr. Berg made it clear that even if another state had issued a license with a name discrepancy, they would not follow suit and would require the correct information to be used.     </li> <li>Dr. Berg discussed the process of handling discrepancies found in the FCVS data. He explained that when a discrepancy arises, FCVS typically indicates where the issue lies, such as in medical school or residency information. While the board has historically been lenient and issued licenses if the discrepancies were deemed non-material, the expectation is that the applicant must address and correct any discrepancies. Dr. Berg emphasized that FCVS should function as a tool to prevent discrepancies from going unaddressed. He mentioned plans to discuss this matter with FSMB in hopes of encouraging them to issue guidance for all boards to ensure that discrepancies are corrected upfront, rather than allowing boards to spend additional time identifying and addressing these issues. The goal was to standardize the process so that discrepancies are resolved at the application stage, ensuring more efficient and accurate licensing.     Dr. Aguon expressed full agreement with the approach of addressing discrepancies upfront but highlighted that this issue often arises during discussions of licensing applications. She emphasized the importance of resolving these issues early in the process so that by the time the board reviews applications, as m</li></ul>	GBME	The Board Plans to Implement Stricter Guidelines for Reviewing CME Documentati on and to Provide Applicants with Clearer Instructions. Applicant Unanimously Conditionally Approved Pending Submission of CME and Letter to FCVS

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	receptive to hearing from boards. Dr. Berg also encouraged the board to continue participating actively with FSMB, as this enhances Guam's visibility and influence over FSMB regulations and guidance. A proposal was made to consider working with FSMB on developing a uniform application process that could serve as a national standard, allowing boards to adopt it if they wish, with the ultimate goal of creating more consistency across the board. Dr. Berg intends to bring this idea to Dr. Chaudhry, and expressed excitement about introducing the board members to him.		
	Dr. Nyame reviewed Dr. Garrison's AMA courses and found that her most recent course, taken in January 2023, was outside the required two-year period, making her about three months short of meeting the CME deadline. It was noted that Dr. Garrison's CME credits were close to the requirement, and the board considered approving her application pending the submission of additional CME credits to make up the shortfall. The board agreed that applicants who submit their materials early in the process may encounter issues if their CME credits become outdated before their application is reviewed. The board decided to allow Dr. Garrison the opportunity to submit the additional CME credits necessary for approval. During the discussion, the board addressed an issue with Dr. Garrison's CME certificates, where the names listed did not fully match the name on her passport or application. The board recognized the importance of consistency in ensuring that all names align across documents, but also acknowledged the challenge this posed, particularly when applicants use different names on various documents, such as their driver's license or old medical licenses. Dr. Berg made a suggestion to require applicants to submit a letter if the name on their certificates differed, confirming that the certificate belonged to them. The board agreed to keep this inconsistency in mind as they reviewed the application process and considered whether they could allow some flexibility, provided the board had reasonable assurance that the certificates were indeed issued to the applicant. The issue of matching names was noted for further discussion as the application process is updated. Dr. Garrison's case highlighted the complexity of the issue, as she used multiple names, and the board considered how best to handle such discrepancies in a consistent yet efficient manner.		
	A conversation centered around Dr. Garrison's CME documentation and the inconsistencies in the names and dates presented. There is a clear focus on ensuring that names on all documents, including CME certificates, match exactly with the applicant's official identification (e.g., passport), as consistency is crucial for the board's licensing process. The issue at hand with Dr. Garrison is that while some of her CME credits are from older courses (like the Oakstone CME from 2019), the credits were not issued at the time of completion but rather certified at a later date, potentially causing confusion with dates and validity. Additionally, there are discrepancies with how the CME credits are		

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		<ul> <li>being tracked and reported, with some certificates and documents lacking the necessary signatures or not aligning with the total required hours. To address these discrepancies, the board is considering a more standardized, pre-screening approach to ensure all CME documentation is thoroughly checked before it reaches the board. The board would like B. Hattori and B. Sablan to have a clearer set of guidelines for handling these issues upfront, rather than addressing them piecemeal once they are already in the review process. This would prevent delays and ensure that all necessary corrections are made early in the application process. A key point raised is the importance of ensuring that all CME credits are within the two-year window to meet the requirements, and the board is aiming to tighten up processes to avoid any cases where the application is not fully compliant before it is submitted for approval. The board discussed the need for Dr. Garrison to submit a list of all CME credits completed within the last two years that meet the board's requirements. The board agreed that the license could not be issued until the necessary CME documentation was provided, but once the CME was verified and the discrepancy in the name addressed, the license could be granted.</li> <li>Dr. Berg emphasized that Dr. Garrison must submit a letter to the FCVS to clarify any name discrepancies. He asked that B. Hattori should submit the letter once received, to be shared with the board to evaluate. Dr. Berg intends to submit a copy to show Dr. Chaudhry in order to evaluate whether a more standardized national policy, through the FCVS, could be implemented. The proposed policy would involve FCVS verifying discrepancies between applicants' names on their governmentises.</li> </ul>			
		Motion to Approve Pending Submission of CME and Letter to FCVS: Dr. Berg: 2nd: Dr. Nyame.			
IX.	Next Board Meeting	Next regularly scheduled board meeting: Thursday April 17, 2025, at 4:00 pm.	GBME	1714	Set Meeting Time
Х.	Adjournment	Motion to Adjourn: Dr. Berg	GBME	1716	Adjourned

Minutes Drafted by: FLAME TREE Freedom Center, Inc.	Date Submitted: 3/26/2025		
Submitted by the GBME Secretary:	Date:		
Approved by the GBME with or without changes:	Date: 4/18/2025		
Certified by or Attested by the Chairperson:	Date: 4/18/2025		