

Florida Laws & Rules

Podiatric Medicine

SAM - 2016

Florida Podiatric Medical Association

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Educational Objectives - Florida Laws and Rules

1. Understanding of applicable Laws & Rules for licensed Podiatric Physicians.
2. Knowledge of the disciplinary process.
3. Learning of right afforded to physicians in licensure disciplinary cases.
4. Ability to locate applicable statutes and rules through online resources.
5. How to protect their right to practice.

LICENSE RENEWAL

- **Current licenses expire midnight, Eastern Time, March 31, 2016.**
- Biennium Renewal: All licensees who seek to renew the active status of their licensure must demonstrate that they have completed, during the previous two years, at least forty (40) hours of continuing education (up to 8 of general hours can be home study course).
- 64B18-17.001, F.A.C.
 - (a) At least one (1) of the forty (40) hours must concern the topic of risk management.
 - (b) At least one (1) of the forty (40) hours must be on the subject of laws and rules to bring the licensee up to date on laws and rules of the Board and the regulatory agency under which the Board operates.
 - (c) At least two (2) of the forty (40) hours must be on the subject of prevention of medical errors.
 - (d) For active licensees, up to ten (10) hours of pro bono service may be counted toward the required continuing education for the biennium in which the service was provided. Pro bono service, however, must be performed under the auspices of a nonprofit agency, and proof of such service on the agency's letterhead and signed by the director of the agency, must be provided upon audit of the licensee's continuing education credit hours.
 - (e) Licensees may complete up to three hours of continuing education per biennium in the area of practice management. Must receive approval from Board.
- First Biennium Renewal: Podiatric Physicians initially licensed in the biennium or **within 24 months of initial licensure must attend** one (1) full day at a Florida Board of Podiatric Medicine meeting at which disciplinary hearings are conducted as provided in subsection 64B18-17.005, F.A.C.
- Podiatric Physicians initially licensed and are renewing a license for the first time are required to complete two (2) hours of prevention of medical errors and one (1) hour of HIV/AIDS

FPMA and CE Broker

- THE FPMA REPORTS THE HOURS YOU RECEIVE HERE TODAY TO CE BROKER ON YOUR BEHALF! CE BROKER IS THE STATEWIDE CLEARING HOUSE FOR ALL CONTINUING EDUCATION HOURS FOR HEALTH CARE PROFESSIONALS. **FPMA REPORTS FOR YOU!**

Who's on First?

- Dept. of Health (DOH) – licenses health care practitioners
- Board of Podiatric Medicine (Board) – rulemaking, and disciplinary hearings
- Attorney General's Office (AG) – provide an Attorney for the Board as Gen Counsel
 - Also, provide Attorney(s) from Prosecution Services Unit to represent DOH during prosecution of discipline before Board
- District Court of Appeal (DCA) – court hears appeals from Board and DOAH
- Div. of Admin. Hearings (DOAH) – court hears Formal hearings for disciplinary cases

I. Laws and Rules for Podiatric Physicians

- Florida Statutes(Laws):
 - Chapter 461: Podiatric Medicine Practice Act
 - Chapter 456: Health Professions and Occupations: General Provisions
 - Chapter 120: Administrative Procedure Act
 - Chapter 119: Public Records
 - Chapter 408: Health Care Administration
 - Chapter 112: Public Officers and Employees: General Provisions
- Florida Administrative Code(Rules):
 - Rule 64B18
- <http://floridaspodiatricmedicine.gov/resources/> link to Statutes and Rules

I. Laws

461 Florida Statute – Practice Act

- 461.001 Legislative findings; intent; scope.
- 461.002 Exceptions.
- 461.003 Definitions.
- 461.004 Board of Podiatric Medicine; membership; appointment; terms.
- 461.005 Rulemaking authority.
- 461.006 Licensure by examination.
- 461.007 Renewal of license.
- 461.008 Inactive status.
- 461.009 Itemized patient billing.
- 461.012 Violations and penalties.
- 461.013 Grounds for disciplinary action; action by the board; investigations by department.
- 461.0131 Emergency procedures for disciplinary action.
- 461.0134 Prescription or administration of dimethyl sulfoxide (DMSO); written release and information requirements.
- 461.0135 Operation of X-ray machines by podiatric X-ray assistants.
- 461.014 Residency.
- 461.018 Limited scope of practice; area of need.

I. Laws

461.012 Florida Statute – Practice Act

(1) Each of the following acts constitutes a violation of this chapter and is a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084:

- (a) Practicing or attempting to practice podiatric medicine without an active license or with a license fraudulently obtained.
- (b) Advertising podiatric services without an active license obtained pursuant to this chapter or with a license fraudulently obtained.
- (c) Using or attempting to use a license to practice podiatric medicine which has been suspended or revoked.

(2) Each of the following acts constitutes a violation of this chapter and is a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083:

- (a) Selling or fraudulently obtaining or furnishing any podiatric medicine diploma, license, or record of registration or aiding or abetting in the same.
- (b) Making any willfully false oath or affirmation whenever an oath or affirmation is required by this chapter.
- (c) Using the name or title “Podiatrist,” “Doctor of Podiatry,” or “Doctor of Podiatric Medicine” or using the phrase “foot clinic,” “foot doctor,” “quiropedista,” or any other name, title, or phrase which would lead the public to believe that such person is engaging in the practice of podiatric medicine unless such person is licensed as a podiatric physician in this state.
- (d) Knowingly concealing any information relative to violations of this chapter.

I. Laws

461.013 Florida Statute – Practice Act

- 461.013 Grounds for disciplinary action; action by the board; investigations by department.—
- (1) The following acts constitute grounds for denial of a license or disciplinary action, as specified in s. 456.072(2):
 - (f) Failing to report to the department any person who the licensee knows is in violation of this chapter or of the rules of the department or the board.
 - (l) Failing to keep written medical records justifying the course of treatment of the patient, including, but not limited to, patient histories, examination results, and test results.
 - (cc) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto.

I. Laws

456 Florida Statute

- 456, F.S. - HEALTH PROFESSIONS AND OCCUPATIONS:
- 456.001 Definitions
 - THROUGH
- 456.50 Repeated Medical Malpractice
- **GENERAL HEALTH CARE PROVISION FOR ALL LICENSED HEALTH CARE PROVIDERS**

I. Laws

456.44 Florida Statute (not complete statute)

- (1) DEFINITIONS.—
 - (e) “Chronic nonmalignant pain” means pain unrelated to cancer which persists beyond the usual course of disease or the injury that is the cause of the pain or more than 90 days after surgery.
- (2) REGISTRATION.—Effective January 1, 2012, a physician licensed under chapter 458, chapter 459, chapter 461, or chapter 466 who prescribes any controlled substance, listed in Schedule II, Schedule III, or Schedule IV as defined in s. 893.03, for the treatment of chronic nonmalignant pain, must:
 - (a) Designate himself or herself as a controlled substance prescribing practitioner on the physician’s practitioner profile.
 - (b) Comply with the requirements of this section and applicable board rules.
- (3) STANDARDS OF PRACTICE.—The standards of practice in this section do not supersede the level of care, skill, and treatment recognized in general law related to health care licensure. (a)-(g)

I. Rules

Florida Administrative Code (FAC)

• 64B18-10	GENERAL PROVISIONS	3
• 64B18-11	APPLICATION AND EXAMINATION FOR LICENSURE	2
• 64B18-12	FEES	10
• 64B18-13	LICENSE RENEWAL; INACTIVE LICENSES	4
• 64B18-14	DISCIPLINARY MATTERS	12
• 64B18-15	MEDICAL RECORDS OF PODIATRIC PHYSICIAN WHO DIES, TERMINATES HIS PRACTICE OR RELOCATES; RETENTION; TIME LIMITATIONS	2
• 64B18-16	PODIATRIC RESIDENCY	3
• 64B18-17	CONTINUING EDUCATION	5
• 64B18-18	CERTIFIED PODIATRIC TECHNICIAN (Repealed 2007)	5
• 64B18-23	STANDARDS AND SCOPE OF PRACTICE (Repealed 2008)	1
• 64B18-24	CERTIFIED PODIATRIC X-RAY ASSISTANTS	1

I. Rules

Florida Administrative Code (FAC)

- 64B18-14.001 Probable Cause Panel
- 64B18-14.002 Disciplinary Guidelines
- 64B18-14.003 Aggravating and Mitigating Circumstances
- 64B18-14.004 Advertising
- 64B18-14.005 Solicitation
- 64B18-14.0051 Duty to Self-Report
- 64B18-14.006 Casting Feet
- 64B18-14.0072 Financial Responsibility
- 64B18-14.009 Minor Violations; Notices of Compliance
- 64B18-14.010 Citations
- 64B18-14.011 Mediation
- 64B18-14.012 Address of Record

I. Rules REPEALED

Florida Administrative Code (FAC)

- Rule Chapter: 64B18-18
- Chapter Title: CERTIFIED PODIATRIC TECHNICIAN 64B18-18
- **Rule No.** **Rule Title** **Effective Date**
- 64B18-18.001 Definitions (Repealed) 9/11/2007
- 64B18-18.003 Description of Responsibilities (Repealed) 9/11/2007
- 64B18-18.004 Podiatric Technicians Certified to Podiatrist (Repealed) 9/11/2007
- 64B18-18.005 Policies and Procedures (Repealed) 9/11/2007
- 64B18-18.006 License to Practice Without Supervision (Transferred to 64B18-12.012) 9/3/1998

THERE IS NO PROVISION IN LAW OR RULE THAT ALLOWS THE SUPERVISION OF ANY PRACTITIONER BY A PODIATRIC PHYSICIAN (ARNP, RN, NP, ETC)

II. Investigations

Florida Department of Health (DOH)

- How can an investigation begin?
 - 1) Upon written complaint signed by complaining individual; 2) Anonymous Complaint; 3) Confidential Informant complaint; and 4) DOH.
- Does the Department tell me if I am being investigated?
- Notice of Investigation – letter of investigation.
- Exceptions = Criminal charge or DOH believes notice will be detrimental to investigation

II. Right to Remain Silent Contact by DOH

- You need to fully understand your rights.
- After you receive written notification about investigation, you will receive a phone call from a Department Investigator
 - He/She will try to convince you he/she is your friend
- Often DOH Investigators will try to convince you there is nothing to this Complaint – talk to us and we will close it out! (not always a true statement)

II. Due Process Rights

- Constitutional right to remain silent
- 5th Amendment Due Process right to remain silent as applied to the Federal Government
- 14th Amendment Due Process right to remain silent as applied to the States
- You DO NOT have to respond to any questions by DOH investigator
- ALL communications - through your attorney

II. Why should I invoke my right to remain silent?

- Physician receives letter of investigation for improper advertising, the physician failed to conspicuously identify the podiatric physician by name in the advertisement or failed to conspicuously identify the podiatric physician referred to in the advertising as a podiatric physician. 64B18-14.004, FAC
 - Violation is considered a Minor Violation 64B18-14.009(4)(a), FAC
- Physician decided not to remain silent but to write the DOH on his own behalf....result?

II. Why should I invoke my right to remain silent?

- Response?
 - Physician writes letter to DOH on letterhead without correctly identifying himself as DPM., only – Dr. John Doe
 - Physician received **initial letter** for failing to identify Dr. as DPM and in letter to DOH he again failed to identify himself on letterhead as DPM. – so, Dr receives a second complaint!!!!
 - If letter written by Attorney – Second Violation and NO LONGER Minor Violation

II. Letter from DOH

- At this point, you SHOULD HAVE an attorney – sound legal advice
- DOH – MUST promptly furnish a copy of complaint or document
- Within 45 days – you MUST submit a written response - it MUST be considered by probable cause panel for the Board of Podiatric Medicine

An attorney is able to extend the response timeframe through properly filed motions

II. DOH Resources

- Investigative Subpoena's
 - Supported by Affidavit
 - Departments initiative or request by probable cause
 - The validity may be challenged
 - Was unlawfully issued
- It is unreasonably broad in scope or Requires production of unreasonable materials
- Investigative Depositions
 - Be aware – using deposition at subsequent formal hearing against you
 - DOH may take depositions – own initiative or request probable cause panel; DOH gives you NO NOTICE

II. Investigation Conclusion

- Entire investigative report with all exhibits is forwarded to Departments legal section in Tallahassee –
- *If a Minor Violation or Citation, then case does not go to PC panel – licensee receives notice of Minor Violation or Citation and must comply.
- Presented to probable cause panel -determine whether probable cause exists and an administrative complaint issued; if no probable cause – case dismissed

III. Minor Violations 64B18-14.009, FAC and Citations 64B18-14.010, FAC

- 64B18-14.009 (1) Section 456.073(3), F.S., authorizes the Board, when enforcing rules and statutes, to permit the Department to issue a notice of noncompliance for any initial offense which is a minor violation as defined by Board rule. A minor violation under this statute is defined as one which does not endanger public health, safety, or welfare and does not demonstrate a serious inability to practice.
- (2) Section 120.695, F.S., authorizes the Board, when enforcing rules, to permit the Department to issue a notice of noncompliance when there is a first time offense that is a minor violation as defined by Board rule. A minor violation is defined as one in which there is no economic or physical harm; no adverse effect to the public health, safety, or welfare; and no significant threat of such harm.
- (3) A notice of noncompliance in lieu of other actions is authorized only if the violation is not a repeat violation and only if there is only one violation. If there are multiple violations, then the Department may not issue a notice of noncompliance, but must prosecute the violation under the other provisions of Section 456.073, F.S. There is only one exception to the prohibition against use of a notice of noncompliance when there is more than one violation. A notice of noncompliance may be issued to a registered dispensing practitioner for a first time violation of one or more of the violations listed in subsection (4), paragraphs (f), (g), (l), (m), (n), (o), and (p), if there is not evidence of diversion.

III. Minor Violations 64B18-14.009, F.A.C.

- (Cont.) (4) The Board hereby establishes the following as minor violations which the Department may act upon by issuing notices of noncompliance for an initial offense: (partial listing)
- (b) Patient records deficiencies encompassed by Section 456.057(1) and 461.013(1)(m), F.S.;
- (c) Failure to provide the disclaimer required by Section 456.062, F.S.;
- (i) Failing to properly store medications which require refrigeration, contrary to Rule 64B16-28.104, F.A.C.
- (j) Failing to remove outdated medications from stock, contrary to Rule 64B16-28.110, F.A.C.
- (k) Failing to have proper labeling on all stock medications, contrary to Section 499.007, F.S.

III. Minor Violations 64B18-14.009, FAC

- (cont) Licensee receives Notice of Non-Compliance for a Minor Violation – Licensee must take corrective action within 15 days; failure to correct results in regular disciplinary proceedings against licensee

III. Minor Violations Examples

- Advertising
- Some patient record deficiencies
- For dispensing practitioners: Failing to, before dispensing any drug, give the patient a written prescription and orally or in writing advise the patient that the prescription may be filled in the practitioner's office or at any pharmacy, in violation of Section 465.027(2)(c), F.S. This applies to dispensing practitioners only.

III. Citations 64B18-14.010, F.A.C.

- (1) Pursuant to Section 456.077, F.S., the Board sets forth below those violations for which there is no substantial threat to the public health, safety, and welfare; or, if there is a substantial threat to the public health, safety, and welfare, such potential for harm has been removed prior to the issuance of the citation. Next to each violation is the penalty to be imposed. In addition to any administrative fine imposed, the Respondent shall be required by the Department to pay the costs of investigation. The form to be used is specified in rules of the Department of Health.
- (2) Citations may only be issued for an initial offense of the alleged violation. Subsequent violation(s) of the same rule or statute shall require the procedures of Section 456.073, F.S., to be followed. In addition, should an initial offense for which a citation could be issued occur in conjunction with other violations, then the procedures of Section 456.073, F.S., shall apply.

III. Citations 64B18-14.010, F.A.C.

- The following violations may be disposed of by the Department by citation with the specified penalty of either a fine, and/or a reprimand:
 - CME Violations
 - Practice on Delinquent license
 - Failure to notify DOH of current address and place of practice
 - Failure to provide medical record of ONE patient in a timely manner
 - Soliciting Patients
 - Failure to submit or update profiling

III. Citation Examples

- Failure to document 40 of the 40 required hours = \$5,000 fine and REPRIMAND
- Failure to document required 2 hour medical errors, HIV/Aids, Laws and Rules, or Risk Management = \$500 fine per category
- Failure to notify DOH of change of current mailing address and place of practice = \$500 fine for Podiatrist; \$150 fine for Podiatric X-Ray Asst.

III. Accepting Minor Violation or Citation

- If you accept, you do so without an opportunity for a hearing; However, a Minor Violation or Citation is better than a formal administrative complaint!
- Choice is yours – always seek the advice of legal counsel.
- Be aware – finding of the minor violation remains on the departments records as a violation; Because you are only eligible if **FIRST TIME OFFENSE**

IV. Probable Cause Panel (PCP)

Rule 64B18-14.001, FAC

- Your professional license is not officially placed in jeopardy until a determination of probable cause has been made by no fewer than two and no more than three members of the Board of Podiatric Medicine, in lieu of current member of Board, chair may appoint former member to serve on PC Panel
- Licensing Board function or department function
- Board of Podiatric Medicine makes it a Board Function
- Florida Statute 456.073

IV. Consideration by PCP

- Majority vote – two/three - member panel; if two members, and tie, Chair appoints 3rd member
- Exempt from “Sunshine Law”
 - You CANNOT be present
 - Some boards do it without notice to licensee under investigation
 - Notice is not given when it could be detrimental to the investigation
 - Some boards do notice licensee – to appear before panel with counsel
 - Panel may request the department to provide additional investigative information

IV. Recordings of PCP

- Electronically record all proceedings
- Recorded by a certified court reporter
- Transcripts may be obtained from the court reporter
- Request copy of transcript of the probable cause panel proceeding
- Transcript is also important – must meet test of being “meaningful” – Discussion of evidence by PC members
- Must be some evidence to reasonably indicate
- The Department must justify actions
- Not just “rubber stamp” recommendation
- Transcript - the best place to start

IV. Findings of PCP

- NO Probable Cause = Case dismissed or receipt of Letter of concern
 - Violation exists – formal charges not being filed
 - Issued without an opportunity for hearing or to refute or dispute allegations
 - Becomes public record
 - Unclear – considered disciplinary actions
- YES Probable Cause = Formal charges – Administrative Complaint

V. Administrative Complaint and Election of Rights

- Administrative complaints are sent to a licensee after conclusion of the investigation, presentation to the probable cause panel, and sent with a form titled – Election of Rights.
- The sending of the Administrative Complaint by DOH is deemed served upon the licensee after mailing, and should never be ignored.

V. Election of Rights

- Once received, you must file within 20 days and Failure to file – licensee in default and license may be suspended by the DOH
- Extension of time from department through legal counsel or request
- Three ways to proceed (must choose only one way to proceed):
 - Formal hearing
 - Informal hearing
 - Settlement agreement

V. Election of Rights

- **Formal Hearing** before a hearing officer Division of Administrative Hearings
- Full evidentiary hearing – DOH must meet its burden of proving up the material
 - Quite similar to a criminal or civil case
 - Absolutely foolish – to go this route WITHOUT legal assistance

V. Election of Rights

- Informal Hearing is held before the Board of Podiatric Medicine
- You can NOT dispute the material factual allegations. If you dispute then YOU MUST GO FORMAL.
- Reason to go to an Informal hearing is to Mitigate penalties
- Go informal – take a calculated risk
- NEVER – without conferring with a lawyer

V. Election of Rights

- Stipulated Settlement Agreement is usually enclosed with administrative complaint. It is the Department's offer to settle the case, upon acceptance by the Board of Podiatric Medicine.
- You may Negotiate and modify proposal
- The Department must agree – or there is NO settlement agreement
- Board has various options when presented with a stipulated settlement:
 - Accept the agreement
 - Reject the agreement
 - Counteroffer

VI. Prosecution of Administrative Complaint

- Licensee has due process PROPERTY rights, including, but not limited to:
 - Right to Remain Silent
 - Proper and adequate notice and adequate time to respond
 - See agency's investigative file, called discovery including subpoena's issues, depositions
 - Right to Counsel
 - Right to Examine and cross examine witnesses

VI. Prosecution of Administrative Complaint

- Attorney's from the Attorney General's office presents the case to the Full Board of Podiatric Medicine for Informal Hearings or Settlement Agreements & to the Administrative Law Judge for Formal Hearings
- After completion of the case, and a finding of guilt by either the Board or ALJ, an Order is entered with penalties:
- Penalties can include a reprimand, probation, practice restrictions, or revocation of licensure.

VI. Prosecution Penalties

- Rule 64B18-14.002 (FAC) sets forth all the penalties for violations, which include:
- (d) Advertising in a manner which is false, deceptive or misleading. The Board shall impose a penalty ranging from reprimand to probation and a fine of \$10,000.
- (f) Failing to report to the Department any person the licensee knows to be in violation of Chapter 461, F.S., or the rules of the Board or Department. The Board shall impose a penalty of a reprimand and a fine of \$500 to \$2,000.
- (hh) Failure to report a criminal conviction or plea to the Board in writing within 30 days. The Board shall impose a penalty ranging from reprimand to probation and a \$500 to \$1,000 administrative fine.

VII. Judicial Review and Stays of Final Order

- Upon Order, one party wins – one party loses. If you lose, you can file a Motion to Stay the Order while you Appeal! The burden of proof is on the agency to prove probable danger to the community.
 - You will be the unhappy party
 - Rarity – Department feels need to appeal the decision!

Seek judicial review – District Court of Appeal.

- Five District Court of Appeals
- Each has jurisdiction to hear appeals from licensing boards final orders

VIII. DEA Changes in Laws and Rules

- Determination To Transfer Hydrocodone Combination Products (HCPs) to Schedule II
- DEA rescheduled hydrocodone Based on consideration of all comments, the scientific and medical evaluation and accompanying recommendation of the HHS, and based on the DEA's consideration of its own eight-factor analysis, the DEA finds that these facts and all other relevant data constitute substantial evidence of potential for abuse of HCPs. As such, the DEA has rescheduled HCPs as a schedule II controlled substance under the CSA.

VIII. DEA Changes in Laws and Rules

- Placement of Tramadol Into Schedule IV
- Based on consideration of all comments, the scientific and medical evaluation and accompanying recommendation of the HHS, and based on the DEA's consideration of its own eight-factor analysis, the DEA finds that these facts and all other relevant data constitute substantial evidence of potential for abuse of tramadol. As such, the DEA is scheduling tramadol as a controlled substance under the CSA.
- Based on these findings, the Deputy Administrator of the DEA concludes that tramadol, including its salts, isomers, and salts of isomers, warrants control in schedule IV of the CSA. 21 U.S.C. 812(b)(4).

VIII. Florida Changes in Laws

Prescription Drug Monitoring Program

- Any physician prescribing controlled substances level II-IV should be registered through the PDMP. While not mandatory at this time, if you prescribe a controlled substance II-IV and not view the PDMP, you may be falling below the standard of care. As of July 2014 18% of participating physicians were Podiatric Physicians.

456.44, F.S.

- **REGISTRATION.**—Effective January 1, 2012, a physician licensed under chapter 458, chapter 459, chapter 461, or chapter 466 who prescribes any controlled substance listed in schedule II, schedule III, or schedule IV, as defined in s. 893.03, for the treatment of chronic nonmalignant pain, must:
 - (a) Designate himself or herself as a controlled substance prescribing practitioner on the physician's practitioner profile.
 - (b) Comply with the requirements of this section and applicable board rules.

IX. Recent Board Rulings

- An Administrative Complaint filed alleging violations of Section 461.013(1)(u), F.S., Section 461.013(1)(m) and (ff), F.S., by practicing beyond his license, and having undue influence over patient.
- Department recommendation for discipline:
 - reprimand (this stays on your medical record for life)
 - administrative fine of \$5,000.00, payable within 60 days; administrative costs of \$6,2918.00, payable within 60 days
 - probation for a period of three (3) years with indirect supervision
 - monitor shall review 20% of respondent's active patient records at least once every quarter and respondent shall submit quarterly reports
 - tolling provision applies; leaving active practice for a period of 1 year or more – respondent shall appear before the board and demonstrate his ability to practice podiatric medicine in this state.
- Board moved to and did accept the settlement agreement.

IX. Recent Board Rulings

- Podiatric Physician was neither present nor represented by counsel.
- An administrative complaint filed on July 30, 2013, alleged violation of ss. 461.013(1)(r) and (cc), F.S., by being unable to practice podiatric medicine with reasonable skill and safety due to his abuse of alcohol and for being terminated from the Professionals Resource Network (PRN). Department recommendation for discipline:
 - administrative fine of \$5,000.00
 - **suspension for a period of two years**
 - prior to reinstatement the respondent shall demonstrate rehabilitation and/or ability to practice with reasonable skill and safety as determined by PRN and/or the Board.

X. What if I don't like...

- A Rule as promulgated by the Board of Podiatric Medicine?
 - File for Variance or Waiver of a Rule - 120.542, FAC Variances and waivers shall be granted when the person subject to the rule demonstrates that the purpose of the underlying statute will be or has been achieved by other means by the person and when application of a rule would create a substantial hardship or would violate principles of fairness. Hearing before the Board of Podiatric Medicine.
- A Law in statute?
 - Requires the Florida Podiatric Medicine Practice Act to be opened up and subject to change in all sections of the Practice Act of 461, FS. Through legislative process.

XI. Resources

- www.floridahealth.gov Florida Department of Health Home Page – Verify a License
- www.floridapodiatricmedicine.gov/ Board of Podiatric Medicine Homepage
- www.leg.state.fl.us/Statutes/index.cfm All Florida Statutes
- www.flrules.org/default.asp All Florida Rules of Board, and All Boards

Thank you for your time!

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KNOW YOUR LEGAL RIGHTS AND HOW TO PROTECT THEM