

FILED OF RECORD

COMMONWEALTH OF KENTUCKY  
BOARD OF MEDICAL LICENSURE  
CASE NO. D2203

JAN - 5 2023

K.B.M.L.

IN RE: THE APPLICATION TO PRACTICE MEDICINE IN THE COMMONWEALTH OF KENTUCKY FILED BY KRISTIN J. DOBAY, M.D., LICENSE NO. 38100, 34500 GREENWOOD DRIVE, HOPKINSVILLE, KENTUCKY 42240

**ORDER DENYING APPLICATION FOR RE-REGISTRATION**

At its December 15, 2022 meeting, the Kentucky Board of Medical Licensure (“the Board”) took up the Application for Re-Registration of Kentucky Medical/Osteopathic License in the Commonwealth of Kentucky filed Kristin J. Dobay, M.D. (“the licensee”). In addition to the re-registration application received April 4, 2022, the Board considered the following: panel memoranda from Dawn Beahl, Re-Registration Coordinator, dated May 13 and October 12, 2022; correspondence (with enclosures) from Kimberly G. Silvus, Esq., dated May 13, 2022; citation and court records regarding *Com. v. Dobay*, Case No. 18-T-04141 (Christian District Court); National Practitioner Data Bank Report of Clinical Privileges Action, dated December 12, 2018; correspondence to the licensee from R. Christopher Jones, M.D., Chief of Staff, TriStar Centennial Medical Center, dated December 20, 2018 and January 11, 2019; correspondence to the licensee from Mark Carr, M.D., Chief of Staff, Saint Thomas Midtown Hospital, dated December 14, 2018; National Practitioner Data Bank Report of State Licensure or Certification Action, dated September 18, 2019; Consent Order between the licensee and the Tennessee Board of Medical Examiners, in regard to Complaint No. 2019007891, dated September 18, 2019; Talbott Recovery Admission Screening and History and Physical Exam (dated December 31, 2018 and January 2, 2019), Psychiatric Evaluation (dated January 1, 2019), Discharge Summary (dated January 3, 2019) and 72-Hour Assessment Report (dated January 5, 2019); Psychological Evaluation by Steven C. Snook, Ph.D., dated January 8, 2019; Talbott Recovery Psychiatric Progress Note, dated January 11, 2019; various lab reports on specimens collected December 31, 2018 and January 2,

February 18, and March 9, 2019; Office Visit Progress Notes, UF Health Florida Recovery Center, dated May 8, 2019; Discharge Summary Note, FRC Partial Hospitalization, dated May 14, 2020; Vanderbilt Comprehensive Assessment Program Evaluation Reports, dated December 2, 2011 and August 14, 2019; Vanderbilt Comprehensive Assessment Program Re-Evaluation Report, dated May 13, 2021; Acumen Institute Phase I Comprehensive Intensive Day Treatment and Educational Process Discharge Summary and Recommendations, dated November 11, 2019; Acumen Institute Professional and Personal Boundary Evaluation Final Report, dated December 10, 2020; correspondence to the licensee from Stacy Tarr, Director, Tennessee Board of Medical Examiners, dated November 3, 2021; correspondence to Dawn Beahl, Re-Registration Coordinator, from Tina F. Simpson, M.D. Medical Director of the Kentucky Physicians Health Foundation, dated May 5, 2022; FRC Psych DC Summary, dated May 15, 2020; Board Minutes, dated June 16, 2022; LifeGuard Final Report, dated October 10, 2022; e-mail correspondence from Gerisse Horne, dated December 14, 2022; and e-mail correspondence from Keith Paridy, dated June 6, 7 and 15, September 8 and 9 and December 8, 2022. The applicant was given notice of the Board's June 16 and December 15, 2022 meetings and its intent to consider denial of his re-registration application and an opportunity to be heard; the applicant did appear and was heard by the Board on both June 16 and December 15, 2022.

Having considered all the information presented and being sufficiently advised, the Board makes the following Findings of Fact and Conclusions of Law and denies the Application for Re-Registration of Kentucky Medical/Osteopathic License filed by Kristin J. Dobay, M.D.

#### FINDINGS OF FACTS

1. Between 2003 and 2013, the licensee maintained an active license to practice medicine in the Commonwealth of Kentucky.

2. On or about August 7, 2011, the licensee was arrested and charged with Reckless Driving, Possessing an Open Alcohol Container in a Motor Vehicle and Operating a Motor Vehicle Under the Influence of Alcohol 1<sup>st</sup> offense, in Hopkinsville, Kentucky. On or about May 10, 2012, in *Com. v. Dobay*, Case No. 11-T-06475 (Christian District Court), the Reckless Driving charge was dismissed and the licensee entered a plea of guilty to the charges of Possessing an Open Alcohol Container in a Motor Vehicle and Operating a Motor Vehicle Under the Influence of Alcohol 1<sup>st</sup> offense.
3. In or around the Fall of 2011, the licensee underwent an evaluation at the Vanderbilt Comprehensive Assessment Program (“VCAP”) upon referral from the Tennessee Medical Foundation (“TMF”) and was diagnosed with Alcohol Abuse (rule-out Alcohol Dependence) and Compulsive Traits. VCAP noted

There is little doubt that Dr. Dobay is an intelligent and respected physician and businessman. His denial, inconsistency and incomplete cooperation with timely assessment are noted. We have no doubt that he abused alcohol. Research suggests that he is likely to relapse when external constraints are removed. Outpatient educational, intervention and monitoring may not prevent recurrence.

...

VCAP opined that Dr. Dobay was unfit to practice medicine without conditions and recommended residential treatment specializing in the treatment of impaired physicians to further assess his denial regarding the depth of issues that needed to be addressed. It was also recommended that TMF provide consultation before treatment was initiated.

4. On or about April 1, 2013, the licensee did not renew his license to practice medicine in the Commonwealth of Kentucky and it became inactive.
5. On or about April 4, 2022, the licensee submitted an Application for Re-Registration of Kentucky Medical/Osteopathic License in the Commonwealth of Kentucky.

6. Question No. 1 of the application asks: "Since you last registered have you had any license, certificate, registration or other privilege to practice as a healthcare professional denied, revoked, suspended, probated, restricted, reprimanded, limited or subjected to any other disciplinary action, by a state medical/osteopathic licensing board or federal or international authority with the exception of the Kentucky Medical Board?"
7. In response to Question No. 1, the licensee responded: "Yes."
8. Question No. 3 of the application asks: "Since you last registered have you been or are you currently under investigation by any state medical/osteopathic licensing board or federal or international authority or any drug licensure/enforcement authority with the exception of the Kentucky Medical Board?"
9. In response to Question No. 3, the licensee responded: "Yes."
10. Question No. 5 of the application asks: "Since you last registered have you voluntarily or involuntarily surrendered a medical or osteopathic license with the exception of your Kentucky license, or controlled substance registration certificate issued to you?"
11. In response to Question No. 5, the licensee responded: "Yes."
12. Question No. 6 of the application asks: "Since you last registered has any hospital or hospital medical staff removed, suspended, restricted, limited, probated, reprimanded or failed to renew your privileges for cause, or taken any other disciplinary action against your privileges?"
13. In response to Question No. 6, the licensee responded: "Yes."
14. Question No. 9 of the application asks: "Since you last registered have you been removed, suspended, expelled or disciplined by any professional medical association or society?"
15. In response to Question No. 9, the licensee responded: "Yes."

16. Question No. 10 of the application asks: “Since you last registered have you entered a guilty plea, nolo contendere plea or Alford plea, or been convicted, of any felony offense or any misdemeanor offense in any court?”
17. In response to Question No. 10, the licensee responded: “Yes.”
18. On or about December 7, 2018, the licensee was arrested and charged with Operating a Motor Vehicle Under the Influence of Alcohol (Agg.), 2<sup>nd</sup> Offense, in Hopkinsville, Kentucky. On or about September 1, 2022, in *Com. v. Dobay*, Case No. 18-T-04141 (Christian District Court), the charges were amended down to Reckless Driving and the licensee entered a plea of guilty. The licensee was sentenced and served fourteen (14) days in the Christian County jail over various dates between September and December 2022.
19. On or about December 12, 2018, the Physician Performance Review Committee of Saint Thomas Midtown Hospital, Nashville, Tennessee, summarily suspended the licensee’s privileges based on a determination that it was necessary to protect the life and safety of patients.
20. On or about December 10, 2018, the Medical Executive Committee of TriStar Centennial Medical Center, Nashville, Tennessee, issued a precautionary suspension of the licensee’s privileges.
21. On or about December 31, 2018 and continuing through January 3, 2019, the licensee participated in a comprehensive psychiatric and addictive disorders evaluation at Talbott Recovery Campus (“TRC”), Atlanta, Georgia. Labs collected during the evaluation returned positive for cocaine and cocaine metabolites and were inconsistent with the history provided by the licensee. TRC deemed the assessment to be incomplete and was unable to comment on the licensee’s ability to practice medicine with safety.

22. On or about May 6-9, 2019, the licensee submitted to a comprehensive evaluation at the Florida Recovery Center (“FRC”) at the direction of the TMF and was diagnosed with alcohol use disorder. It was recommended that he refrain from the practice of medicine and enter into treatment program at an institution with expertise in treating distressed/disruptive healthcare individuals; to enter into residential treatment for alcohol use disorder if he relapsed to alcohol; and that any return to practice be conditioned upon completion of treatment and monitoring by TMF.
23. On or about June 3, 2019, the licensee entered a comprehensive intensive day treatment and educational program at the Acumen Institute (“Acumen”), Lawrence, Kansas. He did not successfully complete Phase I before being discharged on or about June 21, 2019, and was deemed unfit to return to the practice of medicine.
24. In or around July 2019, the licensee submitted to a fitness for duty evaluation at VCAP. He was diagnosed with Alcohol Use Disorder (moderate to severe, in partial remission) and deemed unfit to practice. VCAP noted

Dr. Dobay’s presentation during this evaluation was similar to his presentation in 2011. He was again defensive on psychological testing and minimized his history of alcohol use and professional problems. His self-report is unreliable because he has provided inconsistent information regarding past alcohol use and various other elements of his history to different providers and entities at various points in time.

Dr. Dobay’s interim history since our comprehensive evaluation of him in 2011, has confirmed and supported our initial conclusions. Dr. Dobay has an alcohol use disorder. Dr. Dobay’s usage of alcohol has now resulted in at least 3 interactions with police while driving. Two of these resulted in arrests for DUI. As a consequence of these arrests, he has lost two jobs and drawn the scrutiny of medical boards. His treatment for this disorder has consisted of attending four or five Alcoholics Anonymous (AA) meetings in 2011 and a four-day inpatient evaluation in 2019. This is inadequate treatment.

Dr. Dobay’s history also contains several examples of questionable boundaries. These have included being prescribed antidepressants by colleagues, personal relationships with tenants and employees, and prescribing for his fiancé. He has engaged in significant medication assisted

treatment of patients with substance use disorders despite not being trained in addiction medicine. Additionally, he has been accused of prescription fraud.

...

25. On or about September 18, 2019, the licensee (also "Respondent") surrendered his Tennessee medical license pursuant to a Consent Order, Complaint No. 2019007891 (Tennessee Board of Medical Examiners) in which he stipulated facts, including but not limited to the following:

- On or about December 8, 2018, Respondent reported the DUI to his employers, St. Thomas Midtown Hospital (St. Thomas) and TriStar Centennial Medical Center (TriStar).
- On or about December 12, 2018, the St. Thomas Medical Executive Committee suspended Respondent's clinical privileges. Respondent was to develop a thirty (30) day plan to meet with a counselor at Bradford Health Services and be evaluated in Atlanta. Once completed, he was to contact and obtain advocacy with the Tennessee Medical Foundation (TMF) before his privileges could be restored.
- Respondent did not complete the requirements specified by St. Thomas and his privileges remained suspended.
- Respondent chose to voluntarily refrain from practice at TriStar and a precautionary suspension was mandated on December 10, 2018. The mandate included a proposed plan for the Respondent to complete an evaluation at an inpatient facility.
- Respondent reported that he completed an evaluation at Talbott Recovery Campus in Atlanta, Georgia on January 3, 2019.
- Though the Respondent did not submit a report to TriStar confirming the completion of the evaluation, his precautionary suspension was lifted by TriStar on January 8, 2019 with the mandate that he continue counseling sessions and send quarterly reports from a cite vetted by TriStar or vetted by the TMF to allow him practice until his privileges expired on January 31, 2019.
- ... Respondent was also employed by Patient Centered Care, LLC, in Mt. Juliet, Tennessee. Patient Centered Care, LLC, specializes in addiction treatment.
- Respondent was discovered prescribing controlled substances to an individual, L.M. under the name of another physician employed by Patient Centered Care, LLC. L.M. was not a patient of the respondent at Patient Centered Care, LLC, and the Respondent's girlfriend.

- On or about May 31, 2019, a physician employed by Patient Centered Care, LLC, discovered several prescriptions in the Controlled Substance Monitoring Database (CSMD) that were written to L.M. under her name that she did not authorize. The physician had never seen or provided treatment to L.M. at the Patient Centered Care, LLC.
- The prescriptions were filled at Walgreens and copies of the prescriptions were requested by Patient Centered Care, LLC, to review.
- Walgreens provided the following prescriptions written to L.M.:
  - o January 4, 2019 prescription for ninety (90) Ritalin;
  - o January 4, 2019 prescription for twenty-five (25) Clonazepam;
  - o January 4, 2019 prescription for one hundred eighty (180) Gabapentin, with two (2) refills;
  - o January 4, 2019 prescription for thirty (30) Abilify, with two (2) refills;
  - o January 4, 2019 prescription for sixty (60) Depakote, with two (2) refills.
- Further review of the Respondent's prescribing record from Patient Centered Care, LLC, revealed that prescriptions were written to four (4) other individuals who were not patients of Patient Centered Care, LLC.
- These individuals were J.W., W.S., J.L. and a different L.M. Patients J.W. and J.L. were established patients of the Respondent's obstetrics practice but not established patients of Patient Centered Care, LLC.
- On May 24, 2019, J.W. was written a prescription for sixty (60) Norco from Patient Centered Care, LLC.
- On January 8, 2019, W.S. was written a prescription for Methadone 10mg to be taken twelve (12) times a day for four (4) weeks, totaling a 1,440 morphine milligram equivalent. The recommended daily morphine milligram equivalent is 120. W.S. also received a prescription for Oxycodone 30mg to be taken four (4) times a day for four (4) weeks; a 180 morphine milligram equivalent, totaling 1640 morphine milligram equivalent a day, roughly 13.5 times the amount of the recommended daily morphine equivalent. Respondent avers that while this is his prescription pad and DEA number, he does not recall writing the prescription.
- On April 6, 2019, J.L. was written a prescription for sixty (60) 30mg Adderall; April 30, 2019, sixty (60) 30mg Adderall; March 2, 2019, sixty (60) 30mg Adderall; February 2, 2019, sixty (60) 30mg Adderall; January 4, 2019, ninety (90) 1mg Klonopin with two (2) refills; January 4, 2019, sixty (60) 30mg Adderall.
- J.L. was an administrative employee of Patient Centered Care, LLC at the time Respondent wrote the prescriptions. J.L. admitted to selling prescriptions Respondent provided to her for monetary gain.
- On February 11, 2019, L.M. was written a prescription for fifty-six (56) 40mg Oxy-morphone ER.



- On or about June 8, 2019, Respondent was terminated from Patient Centered Care, LLC. This decision was made upon the review of his prescribing habits begin in direct conflict with the standard of care regulated by the Tennessee Medical Board.
26. Pursuant to the Consent Order, the stipulated facts constituted violations of the Tennessee Medical Practice Act, including but not limited to violations of:
- TENN. CODE ANN. § 63-6-214(b)(1) (Unprofessional or unethical conduct)
  - TENN. CODE ANN. § 63-6-214(b)(2) (A violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, this chapter or any lawful order of the board issued pursuant thereto or any criminal statute of this state)
  - TENN. CODE ANN. § 63-6-214(b)(3) (Making false statements or representations, being guilty of fraud or deceit in obtaining admission to practice or being guilty of fraud or deceit in the practice of medicine)
  - TENN. CODE ANN. § 63-6-214(b)(12) (Dispensing, prescribing, or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering or not to cure an ailment, physical infirmity or disease, or in amounts and/or for durations not medically necessary, advisable or justified for a diagnosed condition)
27. In or around October 2019, the licensee surrendered his DEA license.
28. On or about January 29, 2020, the licensee entered residential treatment for alcohol use disorder at FRC. He was discharged on May 15, 2020. Upon discharge, FRC did not endorse his immediate return to the practice of medicine pending additional treatment.
29. In or around June 2020, the American Board of Obstetrics and Gynecology revoked the licensee's certification.
30. On or about September 10, 2020, the licensee submitted to further evaluation at the Acumen, with the aim to assess his recovery status, his understanding of appropriate professional boundaries and his risk for compromised judgments. In regard to the licensee's engagement in therapy following residential treatment, Acumen noted

... There are no indications that his treatment focused on the personality issues that were identified in his Acumen Institute Discharge Summary,

despite Dr. Dobay's claim that therapy was helpful in addressing those issues. ... The assessment team finds the discrepancy between the collateral information and Dr. Dobay's self-report to be concerning especially when considering his tendency to minimize his difficulties. This is an indication that Dr. Dobay has not been forthcoming and transparent with his individual therapists, which has prevented his treatment from addressing the problematic issues at his core. ...

... He uses psychological "buzz words" in describing his treatment experience and emphasizes the experience has been beneficial. He states he is currently working to ameliorate the problematic aspects of his personality that contributed to his poor judgment, and to improve his emotional awareness. However, collateral information indicates that Dr. Dobay failed to disclose his personality-based issues that were previously brought to his attention to his current therapist. Again, Dr. Dobay does not accurately relay the focus of his treatment and instead the team is left with the impression that he is telling us what he thinks we want to hear. That raises obvious concerns that he is continuing to repeat old patterns of poor judgment. ... While he claims he has been able to increase his level of insight into his personal issues and is better equipped to manage his responsibilities and daily stressors, the assessment team believes his claims are exaggerated and overconfident., as the evidence suggests that he still lacks insight. ...

Although Acumen did not assess the licensee's "competence" to practice medicine, it made several recommendations that if the licensee were allowed to resume the practice of medicine, including that "[h]e will require an onsite monitor to verify that he is capable of maintaining boundaries and sound ethical judgment" and his "prescribing practices should be closely monitored, and he should withhold from prescribing controlled substances."

31. In or around April 2021, the licensee submitted to a re-evaluation of his fitness to practice at VCAP. VCAP concluded, in part,

Although he appeared more engaged and cooperative than during prior evaluations, Dr. Dobay continues to present with a persistent pattern of externalization of blame and an associated reduction in personal responsibility. ...

...

It appears that alcohol has not been the primary driver of unprofessional conduct, but rather interpersonal and personality dynamics that contribute to his alcohol use. Indeed, Dr. Dobay has a history of significant interpersonal conflict that he tends to externalize blame for, which is evident in his account during the present evaluation. His unreasonable workload in and outside of medical practice has also contributed to personal and

professional problems. It is important that Dr. Dobay and his providers not measure a successful outcome only by continued abstinence from alcohol but attend to the characterological traits that put him at risk of further boundary violations, risky prescribing practices, and social and occupational harm to himself.

VCAP recommended, in part, that if the licensee should be allowed to resume practice that he enter into a monitoring contract with TMF “indefinitely” and adhere to its terms “in perpetuity;” that he engage in ongoing personality-based psychotherapy to address his “persistent tendency to avoid responsibility by externalizing blame;” and that he not practice outside of his specialty of obstetrics-gynecology or in an environment without supervision.

32. On or about November 3, 2021, the Tennessee Board of Medical Examiners reinstated the licensee’s license to practice medicine in the State of Tennessee with the following restrictions:

- That he be restricted to OB/Gyn practice and from independent practice of OB/Gyn for a minimum of five (5) years
- That he complete a re-entry pathway approved by the Tennessee Board of Medical Examiners medical consultant and an appointed Board member within twelve (12) months
- That he enter into a lifetime monitoring agreement with the TMF (with the possibility of dissolution after ten (10) years, if release is recommended by the TMF) and that the TMF provide quarterly reports indicating his compliance with its monitoring program

33. When the licensee submitted an Application for Re-Registration of Kentucky Medical/Osteopathic License in April 2022, he had not been engaged in the active practice of medicine for at least two (2) years.

34. In or around September 2022, the licensee submitted to a clinical skills assessment at LifeGuard with components specific to obstetrics and gynecology and prescribing of opioids and other controlled substances. The licensee demonstrated sufficient knowledge

and clinical reasoning in regard to topics of obstetrics and gynecology but failed the performance threshold for topics related to opioids and other controlled substances. If permitted to resume practice, LifeGuard recommended, in part, that the licensee participate in a remediation plan specific to gynecology and obstetrics to include a structured preceptorship with a board-certified physician. LifeGuard recommended additional education and monitoring if the licensee were to be allowed to resume prescribing of controlled substances.

#### CONCLUSIONS OF LAW

1. By submitting an application for reregistration of his inactive medical license, the licensee is subject to regulation by the Board.
2. KRS 311.571(9) provides that the Board may deny licensure to the registrant of an inactive license without a prior evidentiary hearing upon a finding that the applicant has violated any provision of KRS 311.595 or 311.597, or is otherwise unfit to practice.
3. KRS 311.595(7) provides that the Board may deny re-registration of a license based upon proof that the licensee has “become a chronic or persistent alcoholic” as that term is defined in KRS 311.550(25) to be
  - ... an individual who is suffering from a medically diagnosable disease characterized by chronic, habitual or periodic consumption of alcoholic beverages resulting in the interference with the individual’s social or economic functions in the community or the loss of powers of self-control regarding the use of alcoholic beverages.
4. KRS 311.595(8) provides that the Board may deny re-registration of a license based upon proof that the licensee has “been unable or is unable to practice medicine according to acceptable and prevailing standards of care by reason of ... an extended absence from the active practice of medicine.”

5. KRS 311.595(9) provides that the Board may deny re-registration of a license based upon proof that the licensee has “engaged in dishonorable, unethical or professional conduct of a character likely to deceive, defraud or harm the public or any member thereof.” KRS 311.597 defines such conduct to include, but not limited to, prescribing or dispensing any medication in such amounts that the licensee knew or had reason to know to be excessive under accepted and prevailing medical standards and

Conduct which is calculated or has the effect of bringing the medical profession into disrepute, including but not limited to any departure from, or failure to conform to the standards of acceptable and prevailing medical practice within the Commonwealth of Kentucky, and any departure from, or failure to conform to the principles of medical ethics of the American Medical Association or the code of ethics of the American Osteopathic Association. ...

6. KRS 311.595(17) provides that the Board may deny re-registration of a license based upon proof that the licensee has

Had his license to practice medicine or osteopathy in any other state, territory, or foreign nation revoked, suspended, restricted or limited or has been subjected to other disciplinary action by the licensing authority thereof. ...

7. KRS 311.595(21) provides that the Board may deny re-registration of a license based upon proof that the licensee has

Been disciplined by a licensed hospital or medical staff of the hospital, including removal, suspension, limitation of hospital privileges, failing to renew privileges for cause, resignation of privileges under pressure or investigation, or other disciplinary action if the action was based upon what the hospital or medical staff found to be unprofessional conduct, professional incompetence, malpractice, or a violation of any provisions of KRS Chapter 311. ...

8. Based upon the Findings of Fact, the licensee is in violation of the provisions of KRS 311.595(7), (8), (9), (17) and (21). Accordingly, there are legal grounds for the Board to deny re-registration of his inactive license.

**ORDER DENYING APPLICATION FOR RE-REGISTRATION**

After due deliberation, the Board hereby ORDERS that the Application for Re-Registration of Kentucky Medical/Osteopathic License in the Commonwealth of Kentucky filed by Kristin J. Dobay, M.D., is hereby DENIED.

SO ORDERED this 5<sup>th</sup> day of January, 2023.



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WILLIAM C. THORNBURY, JR., M.D.  
PRESIDENT

**Certificate of Service**

I certify that the original of this Order Denying Application for Re-Registration was delivered to Mr. Michael S. Rodman, Executive Director, Kentucky Board of Medical Licensure, 310 Whittington Parkway, Suite 1B, Louisville, Kentucky 40222, and copies were mailed via certified mail return-receipt requested to the licensee, Kristin J. Dobay, M.D., 3400 Greenwood Drive, Hopkinsville, Kentucky 42240 and his counsel, J. Fox DeMoisey, Esq., 7241 Fox Harbor Road, Prospect, Kentucky 40059, on this 5<sup>th</sup> day of January, 2023.



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Leanne K. Diakov  
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**EFFECTIVE DATE AND APPEAL RIGHTS**

This Order Denying Application for Re-Registration is effective upon filing.

Pursuant to KRS 311.571(7), KRS 311.593(2), and KRS 13B.140, the applicant may obtain judicial review of this Order by filing a Petition for Judicial Review in Jefferson Circuit Court within thirty (30) days after this Order is mailed or delivered by personal service, as noted above.

Copies of the petition shall be served by the applicant upon the Board and its General Counsel or

Assistant General Counsel. The Petition shall include the names and addresses of all parties to the proceeding and the agency involved, and a statement of the grounds on which the review is requested, along with a copy of this Order.