

Oregon Medical Board
BOARD ACTION REPORT
September 15, 2012

The information contained in this report summarizes new, interim, and final actions taken by the Oregon Medical Board between August 16, 2012 and September 15, 2012.

Scanned copies of Interim Stipulated Orders, Orders of Emergency Suspension, Stipulated Orders, Final Orders, Termination Orders, Modification Orders and Voluntary Limitations are included at the end of this report in the order that they appear in the report. These orders are marked with an * asterisk. **Scanned copies of Corrective Action Agreements and Consent Agreement are not posted, as they are not disciplinary action and impose no practice limitations.** Complaint and Notices of Proposed Disciplinary Action are not listed in this report, as they are not final actions by the Board. Both Orders, however, are public and are available upon request.

Printed copies of the Board Orders not provided with this report are available to the public. To obtain a printed copy of a Board Order not provided in this report, please complete a Service Request Form (<http://egov.oregon.gov/BME/PDFforms/VerDispMalFillin.pdf>) found under the Licensee Information Request Form link on the Board's web site, submit it with the \$10.00 fee *per licensee* and mail to:

Oregon Medical Board
1500 SW 1st Ave, Ste 620
Portland, OR 97201

Copies of the Orders listed below are mailed to Oregon hospitals where the Licensee had self-reported that he/she has privileges.

Beck, Shoshana , LAc; AC00326; Portland, OR

On September 6, 2012, Licensee entered into a Corrective Action Agreement with the Board. In this Agreement, Licensee agreed to complete a 20 hour acupuncture mentorship.

***Sills, Shawn Michael, MD; MD25091; Medford, OR**

On September 6, 2012, the Board issued an Order Modifying Stipulated Order. This Order modifies Licensee's July 12, 2012 Stipulated Order. This Order converts Licensee's suspension from two 30 day periods to one consecutive 60 day period.

If you have any questions regarding this service, please call the Board at (971) 673-2700 or toll-free within Oregon at (877) 254-6263.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27

BEFORE THE
OREGON MEDICAL BOARD
STATE OF OREGON

In the Matter of)
SHOSHANA BECK, LAc)
LICENSE NO. AC00326) CORRECTIVE ACTION AGREEMENT

1.

The Oregon Medical Board (Board) is the state agency responsible for licensing, regulating and disciplining certain health care providers, including acupuncturists, in the state of Oregon. Shoshana Beck, LAc (Licensee) holds an inactive acupuncture license the state of Oregon.

2.

On May 15, 2012, Licensee submitted an application to reactivate her Oregon acupuncture license. Licensee has not practiced clinical acupuncture since August of 2008. Licensee renewed her certification with the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) on July 27, 2012, and completed 60 hours of continuing education units in preparation for the NCCAOM re-certification.

3.

In order to address the concerns of the Board and for purposes of resolving this matter, the Board agrees to grant Licensee an active Oregon acupuncture license contingent upon Licensee satisfying the following conditions:

3.1 Licensee shall obtain a practice mentor under the conditions specified in Licensee's Acupuncture Mentorship Outline (see Attachment A). The practice mentor shall be an acupuncturist who is in good standing with the Board and has held an Oregon acupuncture license for a minimum of five years. The practice mentor shall be approved in advance by the

///

1 Board's Medical Director. Licensee shall comply with all terms of the Acupuncture Mentorship
2 Outline. All costs associated with the practice mentor shall be borne by the Licensee.

3 3.2 Once Licensee completes the terms of this Agreement, she may submit written
4 documentation of her successful compliance with the terms of this agreement to the Board's
5 Medical Director. Upon review and approval by the Medical Director, this Agreement may be
6 terminated. Licensee will be notified in writing of such termination when and if it occurs.

7 3.3 Evidence of violation of the terms of this agreement shall be grounds for
8 discipline pursuant to ORS 677.190.

9 4.

10 Licensee and the Board understand that by resolving this matter through this Corrective
11 Action Agreement, Licensee waives her right to a contested case hearing or appeal therefrom.
12 This Agreement is a public document; however, it is not a disciplinary action and is not
13 reportable to the DataBank.

14
15 IT IS SO AGREED THIS 21st day of August, 2012.

16 **SIGNATURE REDACTED**

17
18 SHOSHANA BECK, LAC
Acupuncture Licensee

19
20 IT IS SO AGREED THIS 6th day of September, 2012.

21
22 OREGON MEDICAL BOARD
State of Oregon

23 **SIGNATURE REDACTED**

24
25 W. KENT WILLIAMSON, MD
Board Chair

Attachment A

ACUPUNCTURE MENTORSHIP OUTLINE

I, Charles Rothschild Lev, clinical mentor, agree to provide mentorship in the practice of acupuncture to Shoshana Beck, clinical trainee, under the following terms and conditions:

- **Total Contact Hours: 20.** I will provide a minimum of 20 total contact hours of mentorship to the clinical trainee. Contact hours are defined as the clock hours that the clinical trainee spends under the direct supervision of the mentor. Off-site supervision is not included.
- **General Health Care Patient Visits.** I will mentor the clinical trainee in the treatment of primarily general health care patient visits. Specialized limited practice, such as smoking withdrawal and/or addictions, may be included in the practice but will not count toward the total required contact hours.
- **Scope of Practice.** I will supervise the following activities, which include but are not limited to: observation, diagnosis, case discussion, question and answer time with mentor, needling, needling with electrical stimulation, cupping, moxabustion, tuina massage, gua sha, herbal prescription, and assembling herbal formulas.
- **Co-sign all Charts.** I will co-sign all charts for patients treated by the clinical trainee under my supervision.
- **Report to the OMB.** I will provide a report to the OMB, to be documented using the attached "OMB Clinical Trainee Evaluation" forms. I will direct the clinical trainee to use the two-page "OMB Clinical Trainee Evaluation - Answer Sheet" form to summarize treatment provided to one of the patients seen by the clinical trainee under my supervision. I, as mentor, will score the "OMB Clinical Trainee Evaluation - Answer Sheet" and will use this score in addition to the "OMB Clinical Trainee Evaluation - Interviewing" and "OMB Clinical Trainee Evaluation - Needling Proficiency" forms to evaluate the trainee's clinical competency. I will send these forms to the Board's *Acupuncture Licensing Specialist*, at the above address, at the end of the mentorship.
- **Compensation.** I will not financially compensate the clinical trainee in exchange for clinical services provided by the clinical trainee.

Anticipated Start and End Dates of Mentorship:

Start Date: 09.10.12 End

SIGNATURE REDACTED

Date of Signature: 08.17.12

1 This modification becomes effective the date this Order is signed by the Board Chair. All other
2 terms of the July 12, 2012 Stipulated Order are unchanged and remain in full force and effect.

3
4 IT IS SO ORDERED this 6th day of September, 2012.

5 OREGON MEDICAL BOARD
6 State of Oregon

7 **SIGNATURE REDACTED**

8 W. KENT WILLIAMSON, MD
9 Board Chair

10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27