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TRANSCRIPT OF QUARTERLY MEETING OF MEDICAL BOARD OF CALIFORNIA

NOVEMBER 9, 2002

PRESIDENT OF BOARD: I have the sign-up list before me. We will start with Dr. Mileikowsky. I hope I pronounced your name close to what's proper. Doctor

G. N. MILEIKOWSKY, M.D.: Yes sir. My name is Dr. Mileikowsky and I am a member of the California Medical Association, American Medical Association and Union of American Physicians and Dentists. Those of you who are members of the American Medical Association and California Medical Association are fully aware of my story. It is a public record. Counsel for the Board just advised me of something which is I believe overly cautious; not to give the names of the hospitals or names of the individuals involved. It is a public record and I am not going to reveal here anything in open session, that is not a public record. In closed session, I shall be more than happy to reveal a lot more. I first would like to thank the President of the Board Dr. Gitnick and the distinguished members of this Board for the time given to me for what I intend to propose. And what I intend to propose is based on my personal experience not on any remote speculation. I first would like to second Dr. Pantosi's support of the President's opening statement because this is the spirit in which I came here. An ounce of prevention is worth in this case 100 tons of cure, not a pound. I have made public on April 1st a document which is entitled "The Rape of the Medical Peer Review Process by Tenet Health System." I have not said anything that is not of public record.

PRESIDENT OF BOARD: Counsel

COUNSEL: The issue is not whether it is a public record. The issue is whether this involves any matter that in the future might come before the Board.

G. N. MILEIKOWSKY, M.D.: I will not mention any names. No problem.

PRESIDENT OF BOARD: Doctor, counsel are we in violation of any act, any procedure?

COUNSEL: He should discuss it in terms of concepts.

G. N. MILEIKOWSKY, M.D.: No problem counsel, no problem.

PRESIDENT OF BOARD: Alright.

G. N. MILEIKOWSKY, M.D.: The reason there is no problem is because the problem is not limited to one single hospital. Or one single chain of hospitals let alone whether it is a forprofit hospital or a non profit hospital. That is why I have absolutely no problem with the counsel's comment. And this is the spirit in which I am coming to you today. What I have discovered and maybe we doctors are considered stupid in general so it takes us longer than others to realize certain things, Is that the system is flawed in many ways and that's why I said earlier that 1244 doesn't go far enough. So that you know, the general counsel and

Vice President of the California Medical Association Ms. Hanson has asked for my opinion last year regarding that issue and her question was very simple. Gil will it help? The answer unfortunately at this point is no. All the documents on this table I brought to provide to you and I will leave them with you today. I was just explaining.

COUNSEL: If they involve any particular case that involves facts that might come before the Board at a later time. They cannot have them.

G. N. MILEIKOWSKY, M.D.: I have a better idea. I'll give it to the counsel and the counsel will decide what she can give you.

PRESIDENT OF BOARD: Ok, (laughter) I think that is a good idea.

G. N. MILEIKOWSKY, M.D.: I have no problem with that. And it will come because most of those documents are associated with my response to an 805 report. But so that counsel knows, I would not be here in the open session unless a public record was established October 11 and October 15th but I am not going to elaborate the copies of the documents are here for counsel to review. Let's go into the real issue. The real issue is and, the analogy is the following. If a plane crashes like the Air Alaska plane that crashed off shores from Los Angeles the way the FAA could investigate and identify the problem of the tail piece that was broken and led to the crash and tragic crash allowed to save thousands of lives because every DC9 in the world, whether in the United States or in California or, anywhere in the world was immediately checked. We do not have the equivalent of the FAA or the FDA as to the issue of the quality of the delivery care that is provided by any hospital. And we have two major flaws and I will start by going into the flaws that we cause as physicians. I have here the editorial page which is only one page written by Professor Parmley from the University of San Francisco which reads Clinical Peer Review or Competitive Hatchet Job. In summary ladies and gentlemen we as physicians, members of medical staffs of hospitals have flawed the system when abusing it for individual interests. What the document that I alluded to earlier and, I will only describe as rape of the Medical Peer Review without indicating name of any institution here, goes into the flaws caused by administrators of hospitals and what took me seven months to realize is the answer to the following question. Why would any hospital want no one in its own hospital to know that certain physicians have caused tremendous negligence. And the answer is very simple. If, it is a very big if, but it is a very important if, if those physicians are important economic providers to the hospital and the reputation of those physicians even within the hospital is damaged, the damage goes to the economics of the hospital and the Redding case is a perfect demonstration because the hospital administration was approached more than once and refused other physicians and other

COUNSEL: You are giving too much specifics in this case.

G. N. MILEIKOWSKY, M.D.: Alright, sorry, okay. You didn't hear the word Redding. Alright I am sorry. So as a consequence I am looking at it as a physician. If we cannot trust the medical staff and, if we cannot trust the administrators of the hospital that means we have to remove the whole process out of those two entities. And my proposal is similar to treatment of cancer. First we need radical surgery. And you will be surprised that my

proposal, I hope that counsel and other regulations allows you, but you have the advantage of being an advisory body to regulatory agents and to the body of the assembly. And maybe some regulations definitely will need to be changed. But there is in every hospital, two individuals who are number one, the Quality Assurance Department and number two, the Risk Management Department. These are paid by the hospital. My proposal is that the payment and the salaries go to another body like the California Medical Board and there you have a resource of funds and that those individuals report to the California Medical Board. To create a double check we could have the second individual either the Quality Assurance or the Risk Management Division report to the Department of Health Services. We also should when, there is an issue of summary suspension for any alleged imminent danger that such an issue will immediately go to an external board that does not depend on the hospital or the medical staff. This should not cost the State of California a single nickel. In the same way that every physician is obliged, in order to maintain its active status in the hospital, to participate for free, in some hospitals it is three months per year, in the medical peer review process, nothing is to prevent the physicians from doing so for other hospitals.

PRESIDENT OF THE BOARD: Doctor could you wrap up.

G. N. MILEIKOWSKY, M.D.: Yes sir. I also think that there needs to be some proposals that will save the Board a lot of work and I know that from individuals working on the Board. As the Board is flooded with false 805 reports. If you file a false police report it is a criminal act. There is no reason why a false 805 report should not be considered a criminal act. That will definitely reduce the load of fraudulent and false 805 reports and will allow the resources that the Board has to be better used both in terms of its personnel and in terms of its staff. Furthermore, and it will be my last point Mr. President, the Board in my particular case investigated without any names a summary suspension for non existent imminent danger and found me completely free of any wrong doing. Totally exonerated. Yet the web site of the Board shows the action without showing that the Board exonerated me. I think that is something that needs to be addressed as well.

PRESIDENT OF BOARD: Excuse me now you are getting on a specific case. Yes, you did. You said me. Can I please request that you take that material with Ms. Vadera, the counsel, to make a determination as to what can be left behind.

G. N. MILEIKOWSKY, M.D.: I will leave everything.

PRESIDENT OF THE BOARD: No, but

G. N. MILEIKOWSKY, M.D.: Counsel

PRESIDENT OF THE BOARD: If it can't be shared with the Board. I don't care to take your materials from you.