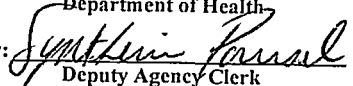


By: 
Deputy Agency Clerk

**STATE OF FLORIDA
BOARD OF OSTEOPATHIC MEDICINE**

**IN RE: PETITION FOR DECLARATORY
STATEMENT OF**

**FLORIDA OSTEOPATHIC MEDICAL
ASSOCIATION, INC.,
FLORIDA SOCIETY OF AMERICAN COLLEGE
OF OSTEOPATHIC FAMILY PHYSICIANS, INC.,
THE FLORIDA MEDICAL ASSOCIATION, INC.,
THE FLORIDA ACADEMY OF FAMILY
PHYSICIANS, INC.,
THE FLORIDA CHAPTER OF THE AMERICAN
ACADEMY OF PEDIATRICS, INC.
THE FLORIDA CHAPTER OF THE AMERICAN
COLLEGE OF PHYSICIANS, INC., AND
THE FLORIDA SOCIETY OF DERMATOLOGISTS
AND DERMATOLOGIC SURGEONS, INC.**

**FINAL ORDER
REGARDING PETITION FOR DECLARATORY STATEMENT**

This matter originally appeared before the Board of Osteopathic Medicine at a duly-noticed public meeting by telephone and by “GoToMeeting” on August 21, 2020, for consideration of the above-referenced Petition for Declaratory Statement, which is attached as Exhibit “A.” The Notice of Petition for Declaratory Statement was published on July 23, 2020, in Vol. 46, No. 143, of the Florida Administrative Register. The Petitioners were represented at the meeting by Jason Winn, Esquire, and Mary Thomas, Esquire.

On July 28, 2020, counsel for the American College of Obstetricians & Gynecologists (ACOG) filed a Motion to Intervene in this matter. As a preliminary matter during the meeting, the Board granted ACOG’s Motion to Intervene.

The Petitioners' inquiries arise from the application of Section 3 of Section 456.51, Florida Statutes, (Chapter 2020-31, §3, Laws of Florida, Florida Senate Bill (SB) 698), which mandates an executed written informed consent agreement prior to performing pelvic exams on Florida patients. Their specific inquiries are substantially as follows:

a. Does the pelvic examination informed consent requirement in Section 456.51, F.S., apply to the examination of biologically male patients?

b. Does the performance of surgery, a medical procedure, or treatment on the vagina, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissues or organs for nondiagnostic purposes constitute a pelvic exam as defined in Section 456.51, F.S.?

c. Does a discrete visual examination of the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissues or organs constitute a pelvic exam as defined in Section 456.51, F.S.?

d. Does Section 456.51, F.S., require separate written informed consents identifying by name the person(s) performing the examination every time a pelvic exam is conducted during the course of treatment or care for which the patient has presented?

e. Does Section 456.51, F.S., require a written informed consent in emergent situations where the patient is unable to consent and there is no legal representative of the patient available to provide the necessary consent?

FINDINGS OF FACT

1. The facts set forth in the Petition are hereby adopted and incorporated herein by reference as the findings of fact of the Board.

2. The Petitioners are either physicians who perform pelvic examinations or are professional associations or trade organizations comprised of physicians who perform pelvic examinations. As such, they or their members are substantially affected through the application and enforcement of Section 456.51(3), F.S., and therefore, have the requisite standing to bring this Petition.

CONCLUSIONS OF LAW

1. The Board of Osteopathic Medicine has authority to issue this Final Order pursuant to Section 120.565, Florida Statutes, and Rule 28-105, Florida Administrative Code.

2. Section 120.565, Florida Statutes, reads as follows:

120.565. Declaratory statement by agencies

(1) Any substantially affected person may seek a declaratory statement regarding an agency's opinion as to the applicability of a statutory provision, or of any rule or order of the agency, as it applies to the petitioner's particular set of circumstances.

(2) The petition seeking a declaratory statement shall state with particularity the petitioner's set of circumstances and shall specify the statutory provision, rule, or order that the petitioner believes may apply to the set of circumstances.

(3) The agency shall give notice of the filing of each petition in the next available issue of the Florida Administrative Weekly and transmit copies of each petition to the committee. The agency shall issue a declaratory statement or deny the petition within 90 days after the filing of the petition. The declaratory statement or denial of the petition shall be noticed in the next available issue of the Florida Administrative Weekly. Agency disposition of petitions shall be final agency action

3. Rule 28-105.001, Florida Administrative Code, reads as follows:

A declaratory statement is a means for resolving a controversy or answering questions or doubts concerning the applicability of statutory provisions, rules, or orders over which the agency has authority. A petition for declaratory statement may be used only to resolve questions or doubts as to how the statutes, rules, or orders may apply to the petitioner's particular circumstances. A declaratory statement is not the appropriate means for determining the conduct of another person or for obtaining a policy statement of general applicability from an agency.

4. As a preliminary matter, the Board declines to answer Petitioners' inquiries generally described above in paragraphs d. and e, because they were not written in a manner that was conducive to an answer without significant rewording and the Board was not inclined to undertake any reformation of the Petitioners' questions.

5. Section 456.51(1), F.S., which purports to define the term "pelvic examination," reads as follows:

As used in this section, the term "pelvic examination" means the series of tasks that comprise an examination of the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissue or organs using any combination of modalities, which may include, but need not be limited to, the health care provider's gloved hand or instrumentation.

The Board notes that the quote above does not explicitly disclose whether it applies to the examination of both biologically male and female patients. The statutory language itself refers to female anatomical features and genitalia but notably lacks any reference to exclusively male anatomical features.

6. An examination of the staff analyses from both the House of Representatives and the Senate versions of legislation creating Section 456.51, F.S., reveal language that only addresses the treatment of biologically female patients. Staff analyses from both the House and the Senate use the following identical language to describe a "pelvic examination:"

A pelvic examination involves the visual examination of the external genitalia and an internal visual examination of the vaginal walls and cervix using a speculum and palpitation of the pelvic organs. Health care practitioners often perform pelvic examinations as part of the annual well woman visit. A health care practitioner may also perform a pelvic examination to diagnose specific health conditions, such as cancer and bacterial vaginosis. (footnotes omitted)

Staff of Fla. H.R. Subcomm. on Health Quality, CS/HB 1286, CS/CS/SB 698, (2020) p. 3 (rev. July 6, 2020) and Staff of Fla. S. Comm. on Rules, CS/CS/SB 698, (2020) p. 8 (rev. Feb. 28, 2020).

7. Even though it was reported that some legislators, such as the bill sponsor Senator Lauren Book, believe that the pelvic examination informed consent requirement also applies to biologically male patients, the Board is of the opinion that the statutory language and the supporting staff analyses from both legislative bodies indicate otherwise. <http://wusf.usfwusfnews.edu/post/floridas-new-pelvic-exam-law-causes-uncertainty>. Section 456.51(1), F.S., provides an extensive listing of female anatomical features such as the vagina, uterus, fallopian tubes but fails to mention a single male anatomical feature such as the penis, testicles, or scrotum. Furthermore, the staff analyses from both legislative chambers clearly indicate that the term “pelvic examination” refers to a health care procedure performed on biologically female patients to diagnose diseases and other conditions. And again, the analyses contain not a single reference to the treatment of biologically male patients.

8. Board also notes that a pelvic examination, as generally and broadly understood in the medical community, is performed on biologically female patients to evaluate the reproductive organs as part of a regular checkup or if the patient is experiencing symptoms such as pelvic pain or vaginal discharge and involves the examination of the patient’s vulva, vagina, cervix, ovaries, uterus, and rectum for any abnormalities. See <https://www.mayoclinic.org/tests-procedures/pelvic-exam/about/pac-20385135>. Therefore, based on the foregoing, the Board is of the opinion that the informed consent requirement in Section 456.51, F.S., does not apply to the examination of biologically male patients.

9. The Board also notes that the aforementioned staff analyses describe a pelvic examination as a procedure used to examine and diagnose diseases and conditions of the reproductive organs. Such description notably does not include any treatments or procedures that incidentally involves one of the referenced body parts in Section 456.51(1), F.S., such as the vagina, rectum, cervix, or external pelvic tissues. Simply put, there is nothing in the statutory language or in the staff analyses indicating that routine non-diagnostic medical care, treatments, or surgical procedures involving the statute's designated body parts were meant to constitute a "pelvic examination."

10. Accordingly, the Board is of the opinion that the performance of surgery, a medical procedure, or treatment on the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissues or organs for non-diagnostic purposes does not constitute a pelvic examination as defined in Section 456.51(1), F.S.

11. The same analysis applies to Petitioners' inquiry set forth in above paragraph c. Nothing in the statutory language or the staff analyses appear to indicate that a mere visual "examination," as may occur when a physician is looking to see if there is a rash, wound, or other anomaly, that may be located on exterior tissue or organs in the pelvic area constitutes a "pelvic examination." Hence, the Board finds that a discrete visual examination of the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissues or organs does not constitute a pelvic exam as defined in Section 456.51(1), F.S.


12. The Board's response to this Petition addresses solely the questions propounded by the Petitioners and only addresses issues regarding the practice of osteopathic medicine. The Board's conclusions are based solely on its application of the

specific factual circumstances outlined in the Petition to the pertinent statutory and rule provisions set forth above.

This Final Order shall become effective upon filing with the Clerk of the Department of Health.

DONE AND ORDERED this 2nd day of December, 2020.

BOARD OF OSTEOPATHIC MEDICINE



Kama Monfoe, J.D., Executive Director
on behalf of Joel Rose, D.O., CHAIR

NOTICE OF RIGHT TO JUDICIAL REVIEW

A party who is adversely affected by this Final Order is entitled to judicial review pursuant to Section 120.69, Florida Statutes. Review proceedings are governed by the Florida Rules of Appellate Procedure. Such proceedings are commenced by filing one copy of a Notice of Appeal with the Agency Clerk of the Department of Health, and a second copy, accompanied by filing fees prescribed by law, with the District Court of Appeal, First District, or with the District Court of Appeal in the Florida appellate district where the party resides. The Notice of Appeal must be filed within thirty (30) days of rendition of the Order to be reviewed.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing has been furnished by **Certified Mail** to The Florida Osteopathic Medical Association, Inc.,

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Scott A. Rivkees, MD
State Surgeon General

Vision: To be the Healthiest State in the Nation

**INTEROFFICE
MEMORANDUM**

DATE: Wednesday, December 2, 2020

TO: Jennifer Wenhold
HCPR Bureau Chief

FROM: Kama Monroe, J.D., Executive Director
Boards of Acupuncture, Massage Therapy, Osteopathic
Medicine, Speech- Language Pathology & Audiology and the
Council of Licensed Midwifery

SUBJECT: Delegation of Authority

This is to advise that while I am out of the office for the day of Wednesday, December 2, 2020, Gerry Nielsen has delegated authority to serve as Acting Executive Director for the Boards of Acupuncture, Massage Therapy, Osteopathic Medicine, Speech-Language Pathology & Audiology and the Council of Licensed Midwifery. Mr. Nielsen can be reached at (850) 245-4586.

KM/js



1901-4960

FILED
 DEPARTMENT OF HEALTH
 DEPUTY CLERK
 CLERK: *Amanda Morales*
 DATE: **JUL 2 1 2020**

STATE OF FLORIDA
 DEPARTMENT OF HEALTH
 BOARD OF OSTEOPATHIC MEDICINE

IN RE:

Petition for Declaratory Statement of
 Florida Osteopathic Medical Association, Inc.,
 RONALD JOSEPH RENUART SR, D.O., Florida
 Society of the American College of Osteopathic
 Family Physicians, Inc., The Florida Medical
 Association, The Florida Academy of
 Family Physicians, Inc., The Florida
 Chapter of the American Academy of
 Pediatrics, Inc., The Florida Chapter of the
 American College of Physicians, Inc., and
 The Florida Society of Dermatologists and
 Dermatologic Surgeons, Inc.

Case No. _____

PETITION FOR DECLARATORY STATEMENT

Petitioners, the Florida Osteopathic Medical Association, Inc. ("FOMA"), RONALD JOSEPH RENUART, SR. D.O., The Florida Society of the American College of Osteopathic Family Physicians ("FSACOFF"), The Florida Medical Association, Inc. ("FMA"), and The Florida Academy of Family Physicians, Inc. ("FAFP"), The Florida Chapter of the American Academy of Pediatrics, Inc. ("FCAAP"), The Florida Chapter of the American College of Physicians, Inc. ("FCACP"), and The Florida Society of Dermatologists and Dermatologic Surgeons, Inc. ("FSDDS"), by and through undersigned counsel and pursuant to Section 120.565, Florida Statutes, and Chapter 28-105, Florida Administrative Code, petition the Florida Board of Osteopathic Medicine for a Final Order setting forth a declaratory statement on the facts and law presented herein:

1. Petitioner the Florida Osteopathic Medical Association (FOMA) is a Florida-based professional trade organization comprised of nearly 7,500 Florida osteopathic physicians, each of whom practices medicine, including the prescription and administration of aesthetic fillers, and would be entrusted with providing the supervision required by the Petition. The FOMA acts on behalf of its members by representing their common interests before the various governmental entities of the State of Florida, including the Department of Health and the Board of Osteopathic Medicine.
2. FOMA's address, phone number and facsimile number are as follows:
 2544 Blairstone Pines Drive, Tallahassee, FL 32301
 (850) 878-7363; Facsimile: (850) 942-7538

Email: admin@foma.org

3. Petitioner FOMA legal counsel's name, address, phone number, facsimile number, and email are Jason Winn, Esq., 2709 Killarney Way, Suite 4, Tallahassee FL 32309. (850) 222-7199. Facsimile (850) 222-1562. Email: jwinn@jwinnlaw.com.
4. Petitioner Ronald Joseph Renuart, Sr., D.O., is an osteopathic physician licensed in Florida. Dr. Renuart, routinely performs pelvic examinations on his patients.
5. Petitioner FSACOFP is a professional association dedicated to serving over 400 osteopathic physicians in Florida, located at 2544 Blairstone Pines Drive, Tallahassee, FL 32301; (850) 907-6851. The FSACOFP acts on behalf of its members by representing their common interests before the various governmental entities of the State of Florida.
6. Petitioner FMA is a professional association dedicated to the service and assistance of Doctors of Medicine and Doctors of Osteopathic Medicine in Florida, located at 1430 Piedmont Dr. E., Tallahassee, FL 32308. The office telephone number is (850) 224-6496 and the facsimile number is (850) 222-8827. For purposes of this petition, the email address of the FMA is jscott@flmedical.org. The FMA is organized and maintained for the benefit of the approximately 25,000 licensed Florida physicians who comprise its membership. One of the primary purposes of the FMA is to act on behalf of its members by representing their common interests before the various governmental entities of the State of Florida, including the Department of Health and its Boards.
7. Petitioner, The Florida Academy of Family Physicians, Inc. ("FAFP"), is a Florida-based trade organization comprised of approximately 3,300 Florida physicians, each of whom specializes in Family Medicine. As a result, members of the FAFP routinely engage in pelvic examinations, as that term is defined in F.S. 456.051. FAFP's address, phone number and facsimile number are as follows: 13241 Bartram Park Road, Unit 1321, Jacksonville, FL 32258-5229. The office telephone number is (904) 338-4825. For purposes of this petition, the email address of the FAFP is jmillson@fafp.org. The FAFP routinely participates in advocacy efforts on behalf of its members in matters concerning the rights and obligations of physicians, including issues legislation and rules affecting its members.
8. Petitioner, The Florida Chapter of the American Academy of Pediatrics, Inc. ("FCAAP"), is a Florida-based trade organization comprised of Florida physicians, each of whom specializes in Pediatrics. As a result, members of the FCAAP routinely engage in pelvic examinations, of newborns and minors as that term is defined in F.S. 456.051. FCAAP's address, phone number and facsimile number are as follows: 119 S. Monroe Street, #200, Tallahassee, FL 32301. The telephone number is (850) 572-8495. The email address is: doug.bell@mhdffirm.com. The FCAAP routinely participates in advocacy efforts on behalf of its members in matters concerning the rights and obligations of physicians, including issues legislation and rules affecting its members.
9. Petitioner, The Florida Chapter of the American College of Physicians, Inc. ("FCACP"), is a Florida-based trade organization comprised of approximately

7,000 Florida physicians, each of whom specializes in Internal Medicine. As a result, members of the FCACP routinely engage in pelvic examinations, as that term is defined in F.S. 456.051. FCACP's address, phone number and facsimile number are 2410 Ormsby Circle West, Jacksonville, FL 32210. The telephone is (904) 355-0800. Email address is dmoerings@floridachapteracp.org. The FCACP routinely participates in advocacy efforts on behalf of its members in matters concerning the rights and obligations of physicians, including issues legislation and rules affecting its members.

10. Petitioner, The Florida Society of Dermatologists and Dermatologic Surgeons, Inc. ("FSDDS"), is a Florida-based trade organization comprised of approximately 530 Florida physicians, each of whom is board certified in Dermatology. As a result, members of the FSDDS routinely engage in pelvic examinations, of newborns and minors as that term is defined in F.S. 456.051. FSDDS's address, phone number and facsimile number are as follows: 6134 Poplar Bluff Road, Suite 101, Peachtree Corners, GA 30092. The telephone number is (904) 880-0023 Facsimile: (305) 422-3327. The Email address is: fsdds@att.net. The FSDDS routinely participates in advocacy efforts on behalf of its members in matters concerning the rights and obligations of physicians, including issues regarding the interpretation of legislation and regulations.
11. The legislation eliciting this Petition is Section 3 of Florida Senate Bill 698, codified as Section 456.51, Florida Statutes. This legislation, which became effective on July 1, 2020, prohibits health care practitioners, medical students, or any other students receiving training as a health care practitioner from performing a pelvic examination on a patient (in most instances) without the written consent of the patient or the patient's legal representative.
12. A substantial number of members of the Association Petitioners perform "pelvic examinations" or portions of "pelvic examinations" as that term is now defined in section 456.51, Florida Statutes, on their patients, or, perform examinations that may or may not be considered a pelvic examination under s. 456.51, Florida Statutes. These members, including Dr. Renuart, are substantially affected by section 456.51, Florida Statutes as failure to comply with the written consent requirement may result in disciplinary action by the Board.
13. The written consent requirement imposed by s. 456.51, Florida Statutes, has created a tremendous amount of uncertainty for Dr. Renuart and other physicians in Florida as to whether the medical care provided to a patient in various circumstances constitutes a "pelvic examination" under the new law. The new law defines "pelvic examination" as "the series of tasks that comprise an examination of the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissue or organs using any combination of modalities, which may include, but need not be limited to, the health care provider's gloved hand or instrumentation." The law does not specifically provide that a "pelvic examination" includes examinations performed on male patients. The original intent of Section 3 of SB 698, which was originally filed as SB 1470 before being added to SB 698, was to require express consent

before a pelvic examination is performed on an anesthetized or unconscious female patient. See *Lauren Book seeks protections for women, vulnerable students as 2020 Session nears* <https://floridapolitics.com/archives/315123-book-women-students-2020-session-nears>. A pelvic examination, as understood in the medical community, is performed on female patients as part of a regular checkup, or if the patient is experiencing symptoms such as unusual vaginal discharge or pelvic pain, and involves an examination of the female patient's vulva, vagina, cervix, ovaries, uterus, rectum and pelvis for any abnormalities. See Mayo Clinic website at <https://www.mayoclinic.org/tests-procedures/pelvic-exam/about/pac-20385135>.

14. Given the legislative intent, the common understanding of the term "pelvic examination" among the medical community, and the fact that s. 456.51, Florida Statutes, does not specifically include or exclude a pelvic examination on a male patient, Petitioners request a declaratory statement that Dr. Renuart is not required by s. 456.51, Florida Statutes, to obtain the written consent of a male patient prior to performing a genital or rectal examination on a male patient.
15. Petitioners are also uncertain as to what exactly constitutes a "pelvic examination." While the term is defined as the "series of tasks that comprise an examination" of certain parts of the anatomy, the law does not indicate whether the mere touching of or looking at the listed parts of the anatomy in the process of performing a medical procedure or other routine care or treatment also constitutes a "pelvic examination." The term "examination" is generally defined as "an investigation or inspection made for the purpose of diagnosis." *The American Heritage Medical Dictionary Copyright 2007, 2004 by Houghton Mifflin Company*. The Petitioners assert that a medical procedure that is performed on the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissue or organs for any purpose other than diagnostic purposes¹ does not constitute a "pelvic examination," and thus the written consent required by s. 456.51, Florida Statutes, should not apply.
16. Petitioners therefore request a declaratory statement that when Dr. Renuart performs a surgical procedure on the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissue or organs of a patient (such as a circumcision, vasectomy, etc.), or touches the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissue or organs for non-diagnostic purposes (such as the insertion of a catheter, rectal wound care, taking a rectal temperature, cleansing the pelvic area after a diaper change, etc.), or touches the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissue or organs as part of a diagnostic procedure of tissue or organs not involving the vagina, cervix, uterus, fallopian tubes, ovaries, rectum, or external pelvic tissue or organs (such as barium enemas, voiding cystourethrograms, rectal administration of contrast for CTs and

¹ The same would be true when cleansing as part of changing a diaper or bandage, inserting or caring for various types of catheters, applying a fecal incontinence bag, application of barrier cream, wound care in the area of the rectum or genitals, bathing a patient, taking a rectal temperature, insertion of a catheter tip for a barium enema or shaving the pelvic area in preparation for surgery.

MRIs, etc.) he is not required by s. 456.51, Florida Statutes, to obtain the patient's written consent.

17. In addition to questions regarding the scope of the term "pelvic examination," Petitioners are uncertain as to the scope of the written consent required pursuant to s. 456.51. The written consent under this statute must be "executed specific to, and expressly identifying, the pelvic examination." As there is nothing in the legislative history of SB 698 to indicate it was the intent of the legislature to impose extremely burdensome or impractical obligations on health care practitioners, the most reasonable interpretation of this requirement would be that it requires written consent that expressly identifies that a pelvic examination will be conducted. There is no temporal requirement for the written consent, or that a separate written consent must be obtained prior to each and every pelvic examination. There is also no requirement that each and every person who may be involved in the pelvic examination be listed by name on the written consent. Therefore, Petitioners request a declaratory statement that the required written consent may authorize one or more "pelvic examinations" as may be necessary during the course of treatment or care for which the patient has presented and must identify the type of provider who may perform the "pelvic examination," but is not required to identify providers by name and does not require separate written consent every successive time a "pelvic examination" is conducted during the course of treatment or care for which the patient has presented.
18. Furthermore, it is unclear as to whether the written consent requirement in s.456.51, Florida Statutes, applies in situations where the only "examination" is visual, as may occur when looking to see if there is a rash, wound, or other anomaly involving exterior tissue or organs as might occur in any number of situations, including visual examination of a newborn baby or even a virtual visit being completed via telehealth. Therefore, Petitioners request that the declaratory statement clarify that the written consent requirement in s. 456.51 does not apply in situations where the only examination will be visual without physical contact with any of the parts of the anatomy included in the new statutory definition of "pelvic examination."
19. Finally, s.456.51, Florida Statutes, is silent as to the application of the requirement for written consent in emergent situations when the patient is unable to consent and there is no legal representative of the patient available to give consent. This situation is extremely likely to occur with patients who come to or are brought to an emergency room unattended by a person who has been designated as a legal representative or when a patient has failed to designate a legal representative and in either case becomes incapable of providing written consent for a "pelvic examination" and the standard of practice requires that an examination of one or more of the parts of the anatomy included in the new statutory definition of a "pelvic examination" be performed. Therefore, Petitioners request that the declaratory statement clarify that in such situations the performance of the medically necessary examination maybe performed without violating s.456.51, Florida Statutes, if a note is entered into the patient record indicating the medical

necessity and the reason for the provider's inability to obtain written consent from the patient or a person designated as the legal representative of the patient.

WHEREFORE, Petitioners respectfully request that the Board of Osteopathic Medicine issue a final order on the individual issues presented above.

Respectfully submitted this 20th day of July, 2020.

By: 

Jason D. Winn

Fla. Bar No: 526681

Florida Osteopathic Medical Association, Inc.

2709 Killarney Way, Suite 4, Tallahassee, FL 32309

Attorney for Petitioner Florida Osteopathic Medical Association,
Ronald Renuart, Sr., D.O., and the FSACOPP

By: 

Jeffery M. Scott

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Florida Medical Association, Inc.

1430 Piedmont Dr. E., Tallahassee, FL 32308

Attorney for Petitioners Florida Medical Association

By: 

Mary Thomas, Esq.

Fla. Bar No. 113148

Florida Medical Association, Inc.

1430 Piedmont Dr. E., Tallahassee, FL 32308

Attorney for Petitioners Florida Medical Association

By: *Christopher L. Nuland*

Christopher L. Nuland, Esq.

Fla. Bar No. 890332

LAW OFFICES OF CHRISTOPHER L. NULAND, P.A.

4427 Herschel Street

Jacksonville, FL 32210

Attorney for Petitioners, Florida Academy of Family

Physicians, Inc., Florida Chapter of the American Academy of Pediatrics, Inc., the Florida Chapter of the American College of Physicians, Inc. and Florida Society of Dermatologists and Dermatologic Surgeons, Inc.

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing was served upon Board of Osteopathic Medicine counsel, Donna McNulty, Esq., Office of Attorney General, via U.S. Mail to The Capitol, PL-01, Tallahassee, FL 32399 and via email to Donna.McNulty@myfloridalegal.com, upon the Florida Department of Health, Agency Clerk, via U.S. Mail to 4052 Bald Cypress Way, Bin A-02, Tallahassee, FL 32399, and upon the Board of Osteopathic Medicine via U.S. Mail to 4052 Bald Cypress Way, Bin C-06, Tallahassee, FL 32399-3253, and via email to Kama.Monroe@flhealth.gov and info@floridasosteopathicmedicine.gov on this 20th day of July, 2020.

By: 

Jason D. Winn
Fla. Bar No: 526681
Florida Osteopathic Medical Association, Inc.
2709 Killarney Way, Suite 4, Tallahassee, FL 32309