

**BEFORE THE BOARD OF HEALING ARTS
OF THE STATE OF KANSAS**

In the Matter of)
the Application for Postgraduate Training)
Program Temporary Permit for)
)
EMERY JAKAB, M.D.)

FILED
JUL 2 8 1997
KANSAS STATE BOARD OF
HEALING ARTS

FINAL ORDER FOLLOWING CONFERENCE HEARING

NOW, on this 27th day of June, 1997, this matter comes on for consideration in conference proceedings before the Kansas State Board of Healing Arts (hereinafter "Board") sitting as a whole as Presiding Officer pursuant to the provisions of K.S.A. 77-533 through 77-535, the Application for Postgraduate Training Program Temporary Permit filed by Emery Jakab, M.D. (hereinafter "Applicant") on June 5, 1997.

Lawrence T. Buening, Jr., Executive Director, presented information regarding Applicant's application to the Board. Applicant appeared by and through counsel, Mr. Steve A. Schwarm, Topeka.

After reviewing the request and being otherwise duly advised in the premises, the Board finds as follows:

1. On June 5, 1997, Applicant filed an Application for Postgraduate Training Program Temporary Permit in the Board office.

2. The Board may issue a postgraduate permit to practice the appropriate branch of the healing arts to any person who is engaged in a full time, approved postgraduate training program and meets the requirements set forth under K.S.A. 1996 Supp. 65-2811(b).

3. The postgraduate training program in which Applicant has been accepted is as a hand fellow in the hand fellowship program conducted by Lynn D. Ketchum, M.D.

4. The hand fellowship program has previously been accredited by the Accreditation Council for Graduate medical Education (ACGME), but Accreditation by that organization was withdrawn on or about December, 1996.

5. The withdrawal of Accreditation by a ACGME of the fellowship program related to the fact that the program is not at present associated with the plastic surgery residency program through the University of Kansas Medical Center, which association was discontinued when Lynn D. Ketchum, M.D. ceased to be a full-time professor at the medical center.

6. The information provided by Applicant reflects that the hand fellowship program is to be conducted in substantially the same manner as when Dr. Ketchum was a full-time professor at the Medical Center and the program was accredited by the ACGME.

7. That the hand fellowship program conducted by Lynn D. Ketchum, M.D., should be approved by the Board as a 12-month postgraduate training program.

8. Upon meeting all of the requirements of K.S.A. 1996 Supp. 65-2811(b), a postgraduate training permit should be issued to Applicant to engage in the practice of medicine and surgery for a period of 12 months in the hand fellowship program conducted by Lynn D. Ketchum, M.D.

IT IS THEREFORE ORDERED as follows:

a. That the findings here and above made be and the same are made the Order of the Board.

b. That the hand fellowship conducted by Lynn D. Ketchum, M.D., consisting of 12 months in duration is approved by the Board as a full-time postgraduate training program.


c. Upon meeting all the requirements of K.S.A. 1996 Supp. 65-2811(b), Applicant shall be issued a postgraduate training permit authorized by that statute. The Board finds that Applicant has met all requirements of K.S.A. 1996 Supp. 65-2811(b) and that such postgraduate training permit should be issued to the Applicant with such being effective from July 1, 1997 through June 30, 1998 and otherwise as authorized by statute.

d. This is a Final Order and is effective upon service upon the parties. Any party may, within fifteen (15) days after service file a petition to review this Order by filing a Petition for Reconsideration. A Petition for Reconsideration is not a prerequisite for seeking administrative or judicial review.


IT IS SO ORDERED.

DATED this 10th day of July, 1997.

KANSAS STATE BOARD OF HEALING ARTS


MARK W. STAFFORD, General Counsel
for Lawrence T. Buening, Jr., Executive Director

Approved:


Steve A. Schwarm, #13232
Goodell, Stratton, Edmonds & Palmer
515 S. Kansas Avenue
Topeka, Kansas 66603-3999

CERTIFICATE OF SERVICE


I, do hereby certify that on the 28th day of July, 1997, a true and correct copy of the above and foregoing Final Order Following Conference Hearing was sent postage prepaid, first class U.S. mail to the following:

Emery Jakab, M.D.
Hand Fellowship Program
5701 W. 119th Street, Suite 237
Overland Park, Kansas 66209-3721

Steve A. Schwarm
Goodell, Stratton, Edmonds & Palmer
515 S. Kansas Avenue
Topeka, Kansas 66603-3999

and a copy was hand-delivered to:

Charlene K. Abbott
Licensing Administrator
Kansas State Board of Healing Arts
235 S. Topeka Blvd.
Topeka, Kansas 66603



Kansas State Board of Healing Arts
235 S. Topeka Blvd.
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