

In re:

STEVEN G. MILLER, M.D.

**BEFORE THE MEDICAL
LICENSURE COMMISSION
OF ALABAMA**

ORDER

This matter is before the Medical Licensure Commission of Alabama on the application for licensure of Steven G. Miller, M.D. Dr. Miller has executed a voluntary restriction on his Certificate of Qualification, limiting his practice in Alabama to the University of South Alabama Surgical Critical Care Fellowship.

The Commission grants and issues a license to practice medicine in the State of Alabama to Steven G. Miller, M.D., likewise restricted to the University of South Alabama Surgical Critical Care Fellowship. *See Ala. Code § 34-24-361(g)* (“If the board attaches restrictions to a physician’s . . . certificate of qualification, it shall notify the commission of the restrictions and the commission shall also place the restrictions on the physician’s . . . license to practice medicine or osteopathy in the State of Alabama.”). This restriction may be removed only by further order of the Commission.

It is further ordered that the Board's Physician Monitor shall periodically monitor Dr. Miller's practice.

DONE on this the 30th day of June, 2023.

THE MEDICAL LICENSURE
COMMISSION OF ALABAMA

By:

E-SIGNED by Craig Christopher, M.D.
on 2023-06-30 11:40:08 CDT

Craig H. Christopher, M.D.
its Chairman

In the Matter of)
 : BEFORE THE ALABAMA BOARD
 STEVEN GREGORY MILLER, M.D.) OF MEDICAL EXAMINERS

**VOLUNTARY RESTRICTION ON CERTIFICATE
OF QUALIFICATION AND LICENSE TO PRACTICE MEDICINE**

The undersigned, STEVEN GREGORY MILLER, M.D., does hereby voluntarily request and consent that the following restrictions be placed upon his certificate of qualification and license to practice medicine in Alabama.

These restrictions are voluntarily entered upon by me, I sign this document willingly, I execute it as my free and voluntary act for the purposes herein expressed, and I am of sound mind and under no constraint or undue influence. I understand and agree that these voluntary restrictions shall continue in full force and effect until they are modified, amended, or terminated by the Alabama Board of Medical Examiners ("the Board") at my written request.

RESTRICTIONS

1. I agree to limit my practice in Alabama to the confines of the University of South Alabama's Surgical Critical Care Fellowship.

2. I agree that this Voluntary Restriction will remain in place until such time as I provide certification that I successfully completed the above-listed fellowship or the program director or supervising physician certifies that I am scheduled to successfully complete the program, at which time I may petition the Board in writing to lift this Voluntary Restriction. In addition to the certification of completion, a report of my progress within the program must be provided to the Board by the program director or supervising physician at the time I petition the Board to lift this Voluntary Restriction.

3. During the period of this Voluntary Restriction, I shall notify the Board of any change of my residence. I will also submit to the Board for its approval any proposed substantive

changes in my practice of medicine, including separation from the above-mentioned fellowship program.

PENALTIES FOR VIOLATION

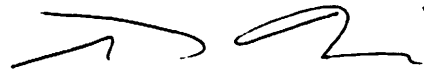
The failure or refusal to satisfy any one or more of the requirements and conditions stated in paragraphs 1 through 3 shall constitute a violation of this Voluntary Restriction. Any violation of this Voluntary Restriction, if established after notice and hearing as provided by the Alabama Administrative Procedure Act and the Rules and Regulations of the Medical Licensure Commission, shall constitute grounds for the suspension, restriction, or revocation of the named physician's license to practice medicine in Alabama or the imposition of any other penalty authorized by Ala. Code § 34-24-361 and 34-24-381(2002).

DISCLOSURE NOTICE

This Voluntary Restriction constitutes a public record of the Alabama Board of Medical Examiners and will be reported by the Board to the Federal National Practitioner Data Bank and the Federation of State Medical Boards disciplinary data bank. This voluntary restriction may be released by the Alabama State Board of Medical Examiners to any person or entity requesting information concerning the licensure status in Alabama of the physician named herein.

CERTIFICATION

I certify that I have read the foregoing Voluntary Restriction on my certificate of qualification to practice medicine in Alabama, that I understand the terms and conditions thereof, and that the same are entered into by me, voluntarily, this 19th day of June, 2023.


STEVEN GREGORY MILLER, M.D.

Witness or Attorney for Dr. Miller