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JANE DOE,
    Plaintiff,
VS.
JOSEPH LADAPO,
     Defendant.
               TRANSCRIPTION OF AUDIO
             Florida Board of Medicine
                    Tab 26 and 39
                    PAGES 1 - 10
                   August 5, 2022
          Stenographically Transcribed By:
                     TRACY BROWN
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Thereupon,

UNIDENTIFIED SPEAKER: -- be given outside of those -- of those environments that we're used to. And so as that happens, I think there's lots of potential for inappropriate care to be given. And so I certainly think it would be appropriate for us to put a working group together, a rules group together to look at creating guidelines so that care is given in an appropriate -- an appropriate manner.

MR. CHAIR: Any other members of the Board have points of discussion? If not, I'd like to call the question.

UNIDENTIFIED SPEAKER: Move to enter rule
making.

MR. CHAIR: I'm sorry, Dr. Hunter.

DR. HUNTER: I'm gonna vote that we go into rule making because I think this is a very, very important issue. I do not like the way the rule was written. I don't think it's nuanced enough. It sends a message that these kids don't need care and they do. The question is what is the best care.

I agree with Mike that this was more of a political rather than a medical discussion.

There's a sense of confidence that we know what we're doing. I was trained by a physician who wanted his physician — this was while he was dying in the hospital. He wanted his physicians to have a lot of self doubt, to question what they were doing, and to not always be certain. And there's a lot of certainty that may not be warranted in this field of medicine.

I heard that there's only one route to trans identity, and that's being born that way. This morning, I met with Louise Freeson. She runs the gender clinic in Stockholm, Sweden, at the Karolinska Institute. They won the Nobel Prize in medicine. I asked her what her experience was and I asked her about the numbers and why the numbers have been skyrocketing. And her answer to me was we do not know. Everybody's asking.

And she gave me four possible reasons.

One, these kids have always been here. She said she thinks with some places, 50 percent of the kids are autistic and she said it's some genetic- -- she's a trained geneticist. She said there's some genetic data that it might be

1 due to autism. And then she's concerned about 2 autism for a second reason, that social 3 influences on autistic kids who think black and white, that that might be why in some places 4 5 50 percent of the kids are autistic. And 6 lastly, she's concerned about what they called, 7 and I'm going to quote, she called "cultural" 8 desires, " those hard with -- and I said -- she 9 was so scared to talk to me, because her 10 English was excellent. She kept on saying it 11 was terrible. But she said -- I said, social contagion? And she goes, yes, that's -- I 12 13 wasn't sure if that was your word in English. 14 So there's -- we don't know. And I think 15 we need to be humble enough to say we don't 16 know. She shared with me that in Sweden, they 17 do not do top surgery or mastectomy until 18 or genital surgery until 23. They don't do cross 18 19 sex hormones until 16. And they only almost 20 exclusively transition kids who show signs of 21 gender dysphoria very, very early. Very, very 22 early. They have a lot of self doubt, that's 23 why they hold back. 24 There's a lot of confidence in this 25 country. There's a lot of confidence in this

1 country about opioids. I think this Board --2 experience and has unbelievable concern about 3 the Brazilian butt lifts and what's been happening to people there. 4 5 I think we have a duty as physicians, 6 whether on this board or not, to be concerned 7 about our profession and what's happening to 8 our patients. I just think we need to be --9 I'm going to vote to go into rule making just 10 to learn more and to hear from everybody. 11 MR. CHAIR: All right. I'd like to call 12 the question. 13 No. No. Out. Out. We're not doing 14 this. We're not doing this. Turn the mic off. 15 It's very disappointing. 16 UNIDENTIFIED SPEAKER: Mr. Chair --17 MR. CHAIR: That was very disappointing. 18 This Board has worked -- that was very 19 disappointing. We've tried to conduct this 20 meeting with the utmost decorum, 21 professionalism throughout this time. 22 Any further discussion from the Board? 23 I'd like to call the question. 24 All in favor of the State's petition, 25 please say aye.

1	(Members reply aye.)
2	MR. CHAIR: Anyone say nay?
3	DR. CAIRNS: Nay.
4	MR. CHAIR: One nay, Dr. Cairns.
5	Anyone else?
6	Motion carries.
7	MR. CHAIR: Next is next is the Board
8	director's remark, tab 35.
9	UNIDENTIFIED SPEAKER: Welcome to the
10	Board.
11	UNIDENTIFIED SPEAKER: Mr. Chair, you got
12	to get in control or we'll just adjourn.
13	UNIDENTIFIED SPEAKER: Can we continue
14	UNIDENTIFIED SPEAKER: The committee
15	reports. I suggest we start with the committee
16	reports.
17	Mr. Chair, I think you should start the
18	committee reports.
19	UNIDENTIFIED SPEAKER: Let's do committee
20	reports. Let's go.
21	MR. CHAIR: Board director's report, Paul?
22	UNIDENTIFIED SPEAKER: He's busy.
23	MR. CHAIR: Council Physician Assistants,
24	Dr. Chandra.
25	DR. CHANDRA: There were two applicants.

One of them was approved, other one was denied 1 2 in their privileges. And they also had a discussion about the licensure fee that was 3 reduced from 150 to \$10, and that was 4 5 unanimously approved. 6 That's it. 7 UNIDENTIFIED SPEAKER: Move to accept. 8 UNIDENTIFIED SPEAKER: Second. 9 UNIDENTIFIED SPEAKER: Second. MR. CHAIR: All in favor? 10 11 (Members reply aye.) 12 MR. CHAIR: Credentials committee, 13 Dr. Ackerman. 14 DR. ACKERMAN: Oh, my gosh. We had the 15 best credentials committee yesterday, let me 16 tell you, Dr. Diamond. I have a full report for you, sir. 17 We began bright and early, 8:00 a.m. 18 19 had nearly 50 cases to review. We welcomed our 20 newest member, Ms. Nicole Justice, to my left. 21 We had Dr. Wasylik, Dr. Chandra there. 22 we were missing our vice-chair, Dr. Pimentel, 23 but thank God you're here with us today. And 24 we had a very wonderful meeting. 25 We approved nine applicants for licensure.

1	We granted licensure with conditions for 19
2	applicants. We tabled six . We allowed ten to
3	withdraw. We granted to two people an
4	extension of time. We granted one person
5	additional practice location. We modified a
6	condition on one person. And we accepted a
7	withdrawal request for the extension of time on
8	one person.
9	In addition to that, we approved
10	ratification to supervisor practice plan and
11	area of practice. And we had a very nice rules
12	discussion, which is summarized in the minutes.
13	And so I put that forth to you all for your
14	approval and ratification.
15	MR. CHAIR: Motion to accept?
16	UNIDENTIFIED SPEAKER: Motion to accept.
17	UNIDENTIFIED SPEAKER: Move to accept.
18	UNIDENTIFIED SPEAKER: So moved.
19	UNIDENTIFIED SPEAKER: Second.
20	UNIDENTIFIED SPEAKER: Second.
21	MR. CHAIR: All in favor.
22	(Members reply aye.)
23	DR. ACKERMAN: I think Mr I'm sorry,
24	is this about my motion?
25	Yes, there was. Help me yes. We had

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1
           one petition for exemption for
 2
           disqualification, it was an AHCA exemption.
 3
           It's not in -- it must be in the minutes but
           not in my summary. So please forgive me for
 4
 5
           not including that.
 6
                MR. CHAIR:
                             Thank you.
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                Next, Dr. Cairns, tab 37. Board of
           Medicine and Osteopathic --
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                 (End of audio.)
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1	CERTIFICATE OF REPORTER
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4	STATE OF FLORIDA
5	COUNTY OF LEON
6	I, Tracy Brown, certify that I was
7	authorized to and did stenographically
8	transcribe the foregoing audio-recorded
9	proceedings, and that the transcript is a true
10	and complete record of my stenographic notes.
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12	Dated this 2nd day of November, 2023.
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15	The state of the s
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