HEALTH

Public

Nirav R. Shah, M.D., M.P.H. Commissioner Sue Kelly Executive Deputy Commissioner

August 14, 2013

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Karen Holloway, M.D. Mississippi State Hospital P.O. Box 157-A Whitfield, MS 39193

Re: License No. 189990

Dear Dr. Holloway:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 13-245. This order and any penalty provided therein goes into effect August 21, 2013.

Please direct any questions to: Board for Professional Medical Conduct, 90 Church Street, 4th Floor, New York, NY 10007-2919, telephone # 212-417-4445.

Sincerely,

REDACTED

Katherine A. Hawkins, M.D., J.D. Executive Secretary Board for Professional Medical Conduct

Enclosure

NEW YORK STATE:	DEPARTMENT OF HEALTH
STATE BOARD FOR	PROFESSIONAL MEDICAL CONDUCT

BPMC No. 13-245

IN THE MATTER

CONSENT

OF

ORDER

KAREN HOLLOWAY, M.D.

Upon the application of KAREN HOLLOWAY, M.D., (Respondent), in the attached Consent Agreement, that is made a part of this Consent Order, it is

ORDERED, that the Consent Agreement, and its terms, are adopted and it is further

ORDERED, that this Consent Order shall be effective upon issuance by the Board, either by mailing of a copy of this Consent Order, either by first class mail to Respondent at the address in the attached Consent Agreement or by certified mail to Respondent's attorney, or upon facsimile or email transmission to Respondent or Respondent's attorney, whichever is first.

SO ORDERED.

DATED: 8/13/2013

REDACTED

ARTHUR S. HENGERER, M.D. Chair State Board for Professional Medical Conduct

STATE	OF NEW YORK:	DEPARTMENT OF HEALTH
STATE	BOARD FOR PR	OFESSIONAL MEDICAL CONDUCT

IN THE MATTER

CONSENT

OF

AGREEMENT

KAREN HOLLOWAY, M.D. CO-12-05-2675-A

KAREN HOLLOWAY, M.D., (Respondent), representing that all of the following statements are true, deposes and says:

That on or about August 6, 1992, I was licensed to practice medicine in the State of New York and issued license number 189990 by the New York State Education Department.

My current address is Mississippi State Hospital, PO Box 157-A, Whitfield, MS 39193, and I will advise the Director (Director) of the Office of Professional Medical Conduct (OPMC) of any change of my address within thirty (30) days, thereof.

I understand that the New York State Board for Professional Medical Conduct (Board) has charged me with one (1) Specification of professional misconduct.

A copy of the Statement of Charges, marked as Exhibit A, is attached to and part of this Consent Agreement.

I do not contest the Specification, and I agree:

to never activate my registration to practice medicine as a physician in New York state. [Limitation on registration or issuance of any further license pursuant to Public Health Law Section 230-a(6)].

I stipulate that my failure to comply with any conditions of the Consent Order shall constitute misconduct as defined by New York Education Law § 6530(29).

I agree that, if I am charged with professional misconduct in future, this Consent Agreement and the Consent Order shall be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to New York Public Health Law.

I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that the Consent Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent Order by first class mail to me at the address in this Consent Agreement, or to my attorney by certified mail, or upon facsimile or email transmission to me or my attorney, whichever is first. The Consent Order, this Consent Agreement, and all attached Exhibits shall be public documents, with only patient identities, if any, redacted. As public documents, they may be posted on the Department of Health website.

I stipulate that the proposed sanction and Consent Order are authorized by New York
Public Health Law §§ 230 and 230-a, and that the Board and OPMC have the requisite powers
to carry out all included terms. I ask the Board to adopt this Consent Agreement of my own free
will and not under duress, compulsion or restraint. In consideration of the value to me of the
Board's adoption of this Consent Agreement, allowing me to resolve this matter without the
various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the
Consent Order for which I apply, administratively and/or judicially, I agree to be bound by the
Consent Order, and I ask that the Board adopt this Consent Agreement.

I understand and agree that the attorney for the Department, the Director, OPMC, and the Chair of the Board each retain complete discretion either to enter into the proposed Consent Agreement and Consent Order, based upon my application, or to decline to do so. I further understand and agree that no prior or separate written or oral communication can limit that discretion.

AFFIRMED:

DATED: 8-1-13

REDACTED

KAREN HOLLOWAY, M.D. Respondent

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The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions.

DATE: 8 7 13

REDACTED

MICHAEL G. BASS
Assistant Counsel
Bureau of Professional Medical Conduct

DATE: 8/12/13

REDACTED

KENTH W. SERVIS Director

Office of Professional Medical Conduct

EXHIBIT A

STATE C	F NEW	YORK
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DEPARTMENT OF HEALTH

STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER

STATEMENT

OF

OF

KAREN HOLLOWAY, M.D. CO-12-05-2675-A CHARGES

KAREN HOLLOWAY, M.D., Respondent, was authorized to practice medicine in New York state on or about August 6, 1992, by the issuance of license number 189990 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. On or about April 16, 2012, the Mississippi State Board of Medical Licensure (hereinafter "Mississippi Board") by CONSENT ORDER, suspended Respondent's Certificate to practice medicine for a period of one (1) year (stayed), and placed Respondent on probation for a period of one (1) year. The Mississippi Board had documented evidence that Respondent was guilty of unprofessional conduct which included being guilty of dishonorable or unethical conduct likely to deceive, defraud or harm the public and had administered, dispensed or prescribed drugs having addiction-forming or addiction-sustaining liability otherwise than in the course of legitimate professional practice.
- B. The conduct resulting in the Mississippi Board disciplinary action against Respondent would constitute misconduct under the laws of New York State, pursuant to the following sections of New York State law:
- New York Education Law §6530(2) (practicing the profession fraudulently)
 and/or;
 - New York Education Law §6530(3) (negligence on more than one occasion).

SPECIFICATION

Respondent violated New York Education Law §6530(9)(d) by having disciplinary action taken by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the disciplinary action would, if committed in New York state, constitute professional misconduct under the laws of New York state, in that Petitioner charges:

The facts in Paragraphs A and B.

DATED: June 13, 2013 Albany, New York

REDACTED

MICHAEL A. HISER
Acting Deputy Counsel
Bureau of Professional Medical Conduct