



**Department
of Health**

KATHY HOCHUL
Governor

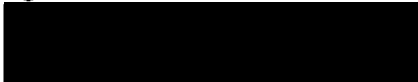
JAMES V. McDONALD, M.D., M.P.H.
Acting Commissioner

MEGAN E. BALDWIN
Acting Executive Deputy Commissioner

April 10, 2023

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Igor Rosien, M.D.



Re: License No. 209198

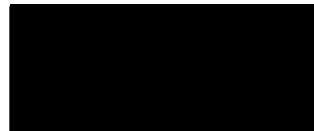
Dear Dr. Rosien:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Modification Order No. 23-075. This order and any penalty provided therein goes into effect April 17, 2023.

The Board Order checklist requires your review and compliance as it relates to your Order.

Please direct any questions to: Board for Professional Medical Conduct, Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204, telephone # 518-402-0846.

Sincerely,



David Besser, M.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

IN THE MATTER
OF
IGOR ROSIEN, M.D.

MODIFICATION
ORDER

Upon the proposed Application for a Modification Order of Igor Rosien, M. D.
(Respondent), which is made a part of this Modification Order, it is agreed to and


ORDERED, that the attached Application, and its terms, are adopted and SO
ORDERED, and it is further

ORDERED, that this Modification Order shall be effective upon issuance by the Board,
either

- by mailing of a copy of this Modification Order, either by first class to Respondent
at the address in the attached Application or by certified mail to Respondent's
attorney, OR
- upon facsimile transmission to Respondent or Respondent's attorney,
whichever is first.

SO ORDERED.

DATE: 4/06/2023


THOMAS T. LEE, M.D.
Chair
State Board for Professional Medical Conduct

1

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

**IN THE MATTER
OF
IGOR ROSIEN, M.D.**

**MODIFICATION
AGREEMENT
AND
ORDER**

Igor Rosien, M.D., represents that all of the following statements are true:

That on or about December 22, 1997, I was licensed to practice as a physician in the State of New York and issued License No. 209198 by the New York State Education Department.

My current address is [REDACTED]

and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

I am currently subject to BPMC Order # 02-339 (Attachment I) (henceforth "Original Order"), which was issued upon an Application For Consent Order signed by me on or about September 20, 2002, (henceforth "Original Application"), adopted by the Original Order and BPMC Order # 08-100 (Attachment II) (henceforth "Second Order"), which was issued upon an Application For Consent Order signed by me on or about May 26, 2008 and adopted by the Second Order. I hereby apply to the State Board for Professional Medical Conduct for an Order (henceforth "Modification Order"), modifying the Original and Second Orders, as follows:

The sanction imposed in the Original Order included:

- Pursuant to N.Y. Pub. Health Law § 230-a(1), I shall be subject to a Censure and Reprimand.

The Original Order also imposed the following conditions:

- That except during periods of actual suspension, Respondent shall maintain active registration of Respondent's license with the New York State Education Department Division of Professional Licensing Services and pay all registration fees.

The sanction imposed by the Second Order included the following:

- I shall not practice emergency medicine until I have completed a clinical competency assessment in emergency medicine and have complied with the terms set forth in "Exhibit B" , which is attached and part of this Consent Agreement.
- That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ Law § 6502 including but not limited to the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees.

The sanctions imposed by both Orders shall be modified to read as follows:

- Pursuant to N.Y. Pub. Health Law § 230-a(6), Respondent shall be subject to a limitation precluding registration or issuance of any further license; and
- That Respondent, who does not currently practice in the State of New York, shall be precluded from practicing medicine in New York State, from practicing in any setting where Respondent's practice is based solely on Respondent's New York license, and from further reliance upon Respondent's New York license to

practice medicine to exempt Respondent from the licensure, certification or other requirements set forth in statute or regulation for the practice of any other profession licensed, regulated or certified by the Board of Regents, Department of Education, Department of Health or the Department of State; and

- That Respondent shall, within 30 days of the issuance of the Modification Order, notify the New York State Education Department, Division of Professional Licensing Services, that Respondent's license status is "inactive", and shall provide proof of such notification to the Director of OPMC immediately upon having done so, and shall not reactivate or reregister the license at any time. This Modification Order shall strike the Condition in the Original Order and in the Second Order requiring Respondent to maintain active registration of Respondent's license with the New York State Education Department, Division of Professional Licensing Services, to pay all registration fees; and
- That Respondent shall comply with all the conditions set forth in attached "Attachment III" ("Requirements for Closing a Medical Practice Following an Agreement to Never Register/Never Practice");

and

- Effective from the date of this Modification Order, the conditions in the Original Order and the Second Order that require Respondent to develop, maintain, and /or update a physician profile shall terminate;

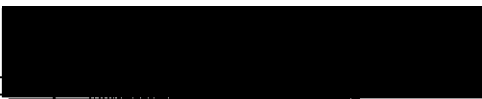
and

All remaining Terms and Conditions will continue as written in the Original Order and the Second Order.

I make this Application of my own free will and accord and not under duress, compulsion or restraint, and seek the anticipated benefit of the requested Modification. In consideration of the value to me of the acceptance by the Board of this Application, I knowingly waive my right to contest the Original Order, the Second Order or the Modification Order for which I apply, whether administratively or judicially, and ask that the Board grant this Application.

I understand and agree that the attorney for the Department, the Director of the Office of Professional Medical Conduct and the Chair of the State Board for Professional Medical Conduct each retain complete discretion either to enter into the proposed agreement and 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.

04/0
DATE ~~4/20~~
23


IGOR ROSIEN, M.D.
RESPONDENT

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

DATE: _____

, ESQ.
Attorney for Respondent

DATE: 04/04/2023

COURTNEY BERRY
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 4-5-2023

SHELLY WANG BANDAGE
Director
Office of Professional Medical Conduct

ATTACHMENT I



New York State Board for Professional Medical Conduct
433 River Street, Suite 303 • Troy, New York 12180-2299 • (518) 402-0863

Antonia C. Novello, M.D., M.P.H., Dr. P.H.
Commissioner
NYS Department of Health

Dennis P. Whalen
Executive Deputy Commissioner
NYS Department of Health

Dennis J. Graziano, Director
Office of Professional Medical Conduct

William P. Dillon, M.D.
Chair

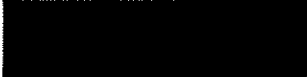
Michael A. Gonzalez, R.P.A.
Vice Chair

Ansel R. Marks, M.D., J.D.
Executive Secretary

PUBLIC

October 29, 2002

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Igor Rosien, M.D.



RE: License No. 209198

Dear Dr. Rosien:

Enclosed please find Order #BPMC 02-339 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect October 29, 2002.

If the penalty imposed by the Order is a surrender, revocation or suspension of this license, you are required to deliver to the Board the license and registration within five (5) days of receipt of the Order to Board for Professional Medical Conduct, New York State Department of Health, Hedley Park Place, Suite 303, 433 River Street, Troy, New York 12180.

Sincerely,


Ansel R. Marks, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Edward W. Fox, Esq.
Harris Beach, LLP
99 Garnsey Road
Pittsford, NY 14534

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

IN THE MATTER
OF
IGOR ROSIEN, M.D.

CONSENT
ORDER

Upon the proposed agreement of Igor Rosien, M.D. (Respondent) for Consent Order, which application is made a part hereof, it is agreed to and

ORDERED, that the application and the provisions thereof are hereby adopted and so ORDERED, and it is further

ORDERED, that this order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the Consent Order to Respondent at the address set forth in this agreement or to Respondent's attorney by certified mail, or upon transmission via facsimile to Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 10/28/02


WILLIAM P. DILLON, M.D.
Chair
State Board for Professional
Medical Conduct

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

IN THE MATTER
OF
IGOR ROSIEN, M.D.

CONSENT
AGREEMENT
AND
ORDER

Igor Rosien, M.D., (Respondent) states:

That on or about December 22, 1997, I was licensed to practice as a physician in the State of New York, having been issued License No. 209198 by the New York State Education Department.

My current address is [REDACTED], and I will advise the Director of the Office of Professional Medical Conduct of any change of my address.

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

A copy of the Statement of Charges is annexed hereto, made a part hereof, and marked as Exhibit "A".

I agree not to contest the first specification, in full satisfaction of the charges against me. I hereby agree to the following penalty:

My license shall be subject to a censure and reprimand.

I further agree that the Consent Order for which I hereby apply shall impose the following conditions:

That, except during periods of actual suspension, Respondent shall maintain active registration of Respondent's license with the New York State Education Department Division of Professional Licensing Services, and pay all registration fees. This condition shall be in effect beginning thirty days after the effective date of the Consent Order and will continue while the licensee possesses his/her license; and

That Respondent shall fully cooperate in every respect with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Order and in its investigation of all matters regarding Respondent.

Respondent shall respond in a timely manner to each and every request by OPMC to provide written periodic verification of Respondent's compliance with the terms of this Order.

Respondent shall meet with a person designated by the Director of OPMC as directed. Respondent shall respond promptly and provide any and all documents and information within Respondent's control upon the direction of OPMC. This condition shall be in effect beginning upon the effective date of the Consent Order and will continue while the licensee possesses his/her license.

I hereby stipulate that any failure by me to comply with such conditions shall constitute misconduct as defined by New York State Education Law §6530(29).

I agree that in the event I am charged with professional misconduct in the future, this agreement and order shall be admitted into evidence in that proceeding.

I hereby make this Application to the State Board for Professional Medical Conduct (the Board) and request that it be granted.

I understand that, in the event that this Application is not granted by the Board, nothing contained herein shall be binding upon me or construed to be an admission of any act of misconduct alleged or charged against me, such Application shall not be used against me in any way and shall be kept in strict confidence during the pendency of the professional misconduct disciplinary proceeding; and such denial by the Board shall be made without prejudice to the continuance of any disciplinary proceeding and the final determination by the Board pursuant to the provisions of the Public Health Law.

I agree that, in the event the Board grants my Application, as set forth herein, an order of the Chairperson of the Board shall be issued in accordance with same. I agree that such order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the Consent Order to me at the address set forth in this agreement, or to my attorney, or upon transmission via facsimile to me or my attorney, whichever is earliest.

I am making this Application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner. In consideration of the value to me of the acceptance by the Board of this Application, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive any right I may have to contest the Consent Order for which I hereby apply, whether administratively or judicially, and ask that the Application be granted.

DATE: 9/20, 2002


IGOR ROSIEN, M.D.
RESPONDENT


The undersigned agree to the attached application of the Respondent and to the proposed penalty based on the terms and conditions thereof.

DATE: 9/23/02



EDWARD FOX
Attorney for Respondent

DATE: 9/30/02



JEFFREY J. CONKLIN
Associate Counsel
Bureau of Professional
Medical Conduct

DATE: 10/24/02



for DENNIS J. GRAZIANO
Director
Office of Professional
Medical Conduct

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

IN THE MATTER
OF
IGOR ROSIEN, M.D.

STATEMENT
OF
CHARGES

Igor Rosien, M.D., the Respondent, was authorized to practice medicine in New York State on or about December 22, 1997, by the issuance of license number 209198 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. Patient A, hereinafter identified in the annexed Appendix, was seen by the Respondent in the emergency room of Rochester General Hospital on February 27, 2001, with complaints of shortness of breath, weight loss and fatigue. A chest x-ray taken of Patient A revealed a moderate right-sided pleural effusion and signs of congestive heart failure. Thereafter, the Respondent performed a left-sided thoracentesis. Respondent deviated from accepted standards of medical care in the following manner:

1. Failing to obtain clotting studies (PT and PTT) prior to performing the thoracentesis;
2. Failing to percuss Patient A's chest prior to performing the thoracentesis; and
3. Performing the thoracentesis on the left side.

B. Patient B, hereinafter identified in the annexed Appendix, was seen by the Respondent in the emergency room at Rochester General Hospital on June 25, 2001, with a complaint of severe abdominal pain, associated with nausea and vomiting. Respondent made a diagnosis of gastroenteritis and Patient B was discharged. Respondent deviated from accepted standards of medical care in the following manner:

1. Failing to perform indicated rectal and pelvic examinations; and
2. Failing to reexamine Patient B prior to the administration of pain medications or to the discharge of said patient.


SPECIFICATION OF CHARGES

FIRST SPECIFICATION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(3) by reason of his practicing the profession of medicine with negligence on more than one occasion, in that Petitioner charges that Respondent committed two or more of the following as alleged in:

1. The facts in paragraphs A and A.1;
2. The facts in paragraphs A and A.2;
3. The facts in paragraphs B and B.1.
4. The facts in paragraphs B and B.2.

DATED: *September 30*, 2002
Albany, New York


PETER D. VAN BUREN
Deputy Counsel
Bureau of Professional
Medical Conduct

ATTACHMENT II

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

IN THE MATTER
OF
IGOR ROSIEN, M.D.

CONSENT
ORDER

BPMC No.#08-100

Upon the application of (Respondent) Igor Rosien, M.D. in the attached Consent Agreement and Order, which 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 transmission to Respondent or Respondent's attorney, whichever is first.

SO ORDERED.

DATE: 6-13-2008

Redacted Signature

KENDRICK A. SEARS, M.D.
Chair
State Board for Professional Medical Conduct

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

IN THE MATTER
OF
IGOR ROSIEN, M.D.

CONSENT
AGREEMENT
AND
ORDER

Igor Rosien, M.D., representing that all of the following statements are true, deposes and says:

That on or about December 22, 1997, I was licensed to practice as a physician in the State of New York, and issued License No. 209198 by the New York State Education Department.

My current address is Redacted Address
and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

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

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

I agree not to contest the misconduct alleged in the first specification as it pertains to the facts in paragraphs C and D, in full satisfaction of the charges against me, and agree to the following penalty:

I shall not practice emergency medicine until I have completed a clinical competency assessment in emergency medicine and have complied with the terms set forth in Exhibit "B," which is attached and part of this Consent Agreement.

I further agree that the Consent Order shall impose the following conditions:

That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ Law § 6502 including but not limited to the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees. Respondent shall not exercise the option provided in N.Y. Educ. Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 30 days after the Consent Order's effective date and will continue so long as Respondent remains a licensee in New York State; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Consent Order and in its investigations of matters concerning Respondent. Respondent shall respond in a timely manner to all OPMC requests for written periodic verification of Respondent's compliance with this Consent Order. Respondent shall meet with a person designated by the Director of OPMC, as directed.

Respondent shall respond promptly and provide all documents and information within Respondent's control, as directed. This condition shall take effect upon the Board's issuance of the Consent Order and will continue so long as Respondent remains licensed in New York State.

I stipulate that my failure to comply with any conditions of this Consent

Order shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

I agree that, if I am charged with professional misconduct in future, this Consent Agreement and 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 N.Y. Pub. 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 this 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 transmission to me or my attorney, whichever is first. The Consent Order, this 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's website.

I stipulate that the proposed sanction and Consent Order are authorized by N.Y. Pub. 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, whether administratively 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 of OPMC and the Chair of the Board each retain complete discretion either to enter into the proposed 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.

DATE 5/26/08

Redacted Signature

 IGOR ROSIEN, M.D.
Respondent

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

DATE: 05/26/08

Redacted Signature

THOMAS M. PRATO, ESQ.
Attorney for Respondent

DATE: 05/30/08

Redacted Signature

VALERIE B. DONOVAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 6/12/08

Redacted Signature

KEITH W. SERVIS
Director
Office of Professional Medical Conduct

Exhibit "A"

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

IN THE MATTER
OF
IGOR ROSIEN, M.D.

STATEMENT
OF
CHARGES

IGOR ROSIEN, M.D., the Respondent, was authorized to practice medicine in New York State on or about December 22, 1997, by the issuance of license number 209198 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. On or around May 12, 2005, Respondent provided medical care to Patient A (patients are identified in Appendix "A" attached hereto), a 25-year-old male who presented to Lakeside Memorial Hospital (LMH) Emergency Department with complaints of fever, chills, joint aches, headache, diarrhea, lethargy and weakness. Respondent's treatment and/or care of Patient A did not meet acceptable standards in that Respondent failed to consider a diagnosis of bacterial sepsis and/or failed to administer appropriate intravenous antibiotics for Patient A.
- B. On or around February 5, 2006, Respondent provided medical care to Patient B, who presented to the LMH Emergency Department with complaints of lower abdominal cramping and vaginal bleeding, and who reported positive results from pregnancy tests. Respondent's treatment and/or care of Patient B did not meet acceptable standards in that

Respondent failed to perform an internal pelvic exam and/or order an appropriate ultrasound.

- C. On or around December 10, 2003, Respondent provided medical care to Patient C, an 81-year-old diabetic male who presented to the LMH Emergency Department with complaints of exhaustion, chills and having difficulty staying awake. Respondent's treatment and/or care of Patient C did not meet acceptable standards in that after treating Patient C's elevated blood sugar level with insulin and appropriate fluids, Respondent failed to repeat the blood sugar laboratory test prior to discharging the patient.
- D. On or around June 17 and 18, 2003, Respondent provided medical care to Patient D, a 68-year-old female who presented to LMH with complaints of weakness, dizziness and periods of confusion associated with unsteadiness of gait. Respondent's treatment and/or care of Patient D did not meet acceptable standards in that Respondent failed to perform or record balance tests, failed to order a CT and/or failed to further investigate the cause of Patient D's symptoms.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(3) by practicing the profession of medicine with negligence on more than one occasion as alleged in the following:

1. The facts in Paragraphs A, B, C, and/or D.

SECOND SPECIFICATION

INCOMPETENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(5) by practicing the profession of medicine with incompetence on more than one occasion as alleged in the following:

2. The facts in Paragraphs A, B, C, and/or D.

DATE: May *30*, 2008
Albany, New York

Redacted Signature

~~PETER D. VAN BUREN~~
Deputy Counsel
Bureau of Professional Medical Conduct

Exhibit "B"

CLINICAL COMPETENCY ASSESSMENT

1. Respondent shall obtain a clinical competency assessment (CCA) performed by a program for such assessment as directed by the Director of the Office of Professional Conduct (OPMC). Respondent shall cause a written report of such assessment to be provided directly to the Director of OPMC within sixty (60) days of the completion of the assessment.
 - a. Respondent shall be responsible for all expenses related to the CCA and shall provide to the Director of OPMC proof of full payment of all costs that may be charged. This shall not be satisfied in the absence of actual receipt, by the Director, of such documentation.
2. At the direction of the Board and within 60 days following the completion of the CCA the Respondent shall identify a Preceptor, preferably a physician who is board certified in the same specialty, to be approved in writing, by the Director of OPMC. The Respondent shall cause the Preceptor to:
 - a. Develop and submit to the Director of OPMC for written approval a remediation plan, which addresses any deficiencies /retraining recommendations identified in the CCA. Additionally, this proposal shall establish a time frame for completion of the remediation program.
 - b. Submit progress reports at periods identified by OPMC certifying whether the Respondent is fully participating in the personalized continuing medical education program and is making satisfactory progress towards the completion of the approved remediation plan.
 - c. Report immediately to the Director of OPMC if the Respondent withdraws from the program and report promptly to OPMC any significant pattern of non-compliance by the Respondent.
 - d. At the conclusion of the program, submit to the Director of OPMC a detailed assessment of the progress made by the Respondent toward remediation of all identified deficiencies.
3. Respondent shall be solely responsible for all expenses associated with these terms, including fees, if any, for the clinical competency assessment, the personalized continuing medical education program, or to the monitoring physician.

ATTACHMENT II

Requirements for Closing a Medical Practice (Following Agreement to Never Register/Never Practice)

1. Licensee shall immediately cease and desist from engaging in the practice of medicine in New York State, or under Licensee's New York license, in accordance with the terms of the Order. In addition, Licensee shall refrain from providing an opinion as to professional practice or its application and from representing that Licensee is eligible to practice medicine in New York or pursuant to a New York license.
2. Within 5 days of the Order's effective date, Licensee shall deliver Licensee's current biennial registration, if any, to the Office of Professional Medical Conduct (OPMC) at Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204-2719.
3. Within 15 days of the Order's effective date, Licensee shall, with regard to New York practice or practice anywhere pursuant to Licensee's New York license, notify all patients of the cessation of Licensee's medical practice, and shall refer all patients to another licensed practicing physician for continued care, as appropriate. Licensee shall notify, in writing, each health care plan with which the Licensee contracts or is employed, and each hospital where Licensee has privileges, that Licensee has ceased medical practice. Within 45 days of the Order's effective date, Licensee shall provide OPMC with written documentation that all patients and hospitals have been notified of the cessation of Licensee's medical practice.
4. Licensee shall, with regard to New York practice or practice anywhere pursuant to Licensee's New York license, make arrangements for the transfer and maintenance of all patient medical records. Within 30 days of the Order's effective date, Licensee shall notify OPMC of these arrangements, including the name, address, and telephone number of an appropriate and acceptable contact persons who shall have access to these records. Original records shall be retained for at least 6 years after the last date of service rendered to a patient or, in the case of a minor, for at

least 6 years after the last date of service or 3 years after the patient reaches the age of majority, whichever time period is longer. Records shall be maintained in a safe and secure place that is reasonably accessible to former patients. The arrangements shall include provisions to ensure that the information in the record is kept confidential and is available only to authorized persons. When a patient or a patient's representative requests a copy of the patient's medical record, or requests that the original medical record be sent to another health care provider, a copy of the record shall be promptly provided or forwarded at a reasonable cost to the patient (not to exceed 75 cents per page.) Radiographic, sonographic and similar materials shall be provided at cost. A qualified person shall not be denied access to patient information solely because of an inability to pay.

5. In the event that Licensee holds a Drug Enforcement Administration (DEA) certificate for New York State, Licensee shall, within fifteen (15) days of the Order's effective date, advise the DEA, in writing, of the licensure action and shall surrender Licensee's DEA controlled substance privileges for New York State to the DEA. Licensee shall promptly surrender any unused DEA #222 U.S. Official Order Forms Schedules 1 and 2 for New York State to the DEA. All submissions to the DEA shall be addressed to Diversion Program Manager, New York Field Division, U.S. Drug Enforcement Administration, 99 Tenth Avenue, New York, NY 10011.
6. Within 15 days of the Order's effective date, Licensee shall return any unused New York State official prescription forms to the Bureau of Narcotic Enforcement of the New York State Department of Health. If no other licensee is providing services at Licensee's practice location, Licensee shall properly dispose of all medications.
7. Within 15 days of the Order's effective date, Licensee shall, with regard to New York practice or practice anywhere pursuant to Licensee's New York license, remove from the public domain any representation that Licensee is eligible to practice medicine, including all related signs, advertisements, professional listings (whether in telephone directories, internet or otherwise), professional stationery or billings. Licensee shall not share, occupy, or use office space in which another licensee provides health care services.

8. Licensee shall not, with regard to New York practice or practice anywhere pursuant to Licensee's New York license, charge, receive or share any fee or distribution of dividends for professional services rendered by Licensee or others while Licensee is barred from engaging in the practice of medicine. Licensee may be compensated for the reasonable value of services lawfully rendered, and disbursements incurred on a patient's behalf, prior to the Order's effective date.
9. If Licensee is a shareholder in any professional service corporation organized to engage in the practice of medicine in New York, Licensee shall divest all financial interest in the professional services corporation, in accordance with New York Business Corporation Law. Such divestiture shall occur within 90 days. If Licensee is the sole shareholder in a professional services corporation, the corporation must be dissolved or sold within 90 days of the Order's effective date.
10. Failure to comply with the above directives may result in a civil penalty or criminal penalties as may be authorized by governing law. Under N.Y. Educ. Law § 6512, it is a Class E Felony, punishable by imprisonment of up to 4 years, to practice the profession of medicine when a professional license has been suspended, revoked or annulled. Such punishment is in addition to the penalties for professional misconduct set forth in N.Y. Pub. Health Law § 230-a, which include fines of up to \$10,000 for each specification of charges of which the Licensee is found guilty and may include revocation of a suspended license.