



# Department of Health

ANDREW M. CUOMO  
Governor

HOWARD A. ZUCKER, M.D., J.D.  
Commissioner

SALLY DRESLIN, M.S., R.N.  
Executive Deputy Commissioner

September 24, 2015

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Dilip Kumar Roy, M.D.



Re: License No. 216564

Dear Dr. Roy:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 15-231. This order and any penalty provided therein goes into effect October 1, 2015.

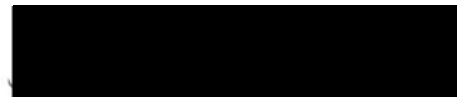
**If the penalty imposed by this Order is a surrender, revocation or suspension, you are required to deliver your license and registration within five (5) days of receipt of this Order to: c/o Physician Monitoring Unit, NYS DOH - OPMC, Riverview Center, Suite 355, 150 Broadway, Albany, NY 12204-2719.**

**If your license is framed, please remove it from the frame and only send the parchment paper on which your name is printed. Our office is unable to store framed licenses.**

If the document(s) are lost, misplaced or destroyed, you are required to submit to this office an affidavit to that effect. Please complete and sign the affidavit before a notary public and return it to the Office of Professional Medical Conduct.

Please direct any questions to: NYS DOH - OPMC, Riverview Center, Suite 355, 150 Broadway, Albany, NY 12204-2719, telephone # (518)402-0855.

Sincerely,



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

cc: Daniel R. Riyan, Esq.  
Smith Sovik Kendrick & Sugnet  
250 South Salina Street, Suite 600  
Syracuse, New York 13202

Enclosure

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

IN THE MATTER  
OF  
DILIP KUMAR ROY, M.D.

SURRENDER  
ORDER

Upon the application of Dilip Kumar Roy, MD (Respondent) to Surrender his license as a physician in the State of New York, which is made a part of this Surrender Order, it is

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

ORDERED, that Respondent's name be stricken from the roster of physicians in the State of New York; it is further

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

- by mailing of a copy of this Surrender Order, either by first class mail to Respondent at the address in the attached Surrender of License 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: 9/24/2015

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

IN THE MATTER  
OF  
DILIP KUMAR ROY, M.D.

SURRENDER  
OF  
LICENSE  
AND  
ORDER

Dilip Kumar Roy, MD, M.D., represents that all of the following statements are true:

That on or about January 6, 2000, I was licensed to practice as a physician in the State of New York, and issued License No. 216564 by the New York State Education Department.

My current address is [REDACTED]

I understand that the New York State Board for Professional Medical Conduct (Board) has charged me with one or more specifications of professional misconduct, as set forth in a Statement of Charges, marked as Exhibit "A", which is attached to and part of this Surrender of License.

I am applying to the State Board for Professional Medical Conduct for permission to surrender my license as a physician in the State of New York on the grounds that I cannot successfully defend against at least two of the acts of misconduct alleged in paragraphs A.1, A.2, A.3, A.4, B.1, B.2, and B.3, of the seventeenth specification in full satisfaction of the charges against me.

I ask the Board to accept my Surrender of License, and I agree to be bound by all of the terms set forth in attached Exhibit "B".

I understand that, if the Board does not accept my Surrender of License, none of its terms shall bind me or constitute an admission of any of the acts of misconduct alleged;

this application 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 the Public Health Law.

I agree that, if the Board accepts my Surrender of License, the Chair of the Board shall issue a Surrender Order in accordance with its terms. I agree that this Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Surrender Order by first class mail to me at the address in this Surrender of License, or to my attorney by certified mail, or upon facsimile transmission to me or my attorney, whichever is first. The Surrender 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(s). OPMC shall report this action to the National Practitioner Data Bank, the Federation of State Medical Boards, and any other entities that the Director of OPMC shall deem appropriate.

I ask the Board to accept this Surrender of License, which I submit of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's acceptance of this Surrender of License, 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 Surrender Order for which I apply, whether administratively or judicially, and I agree to be bound by the Surrender Order.

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.

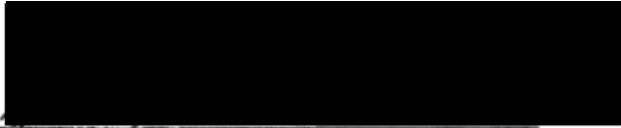
DATE 9/24/2015



DILIP KUMAR ROY, M.D.  
RESPONDENT

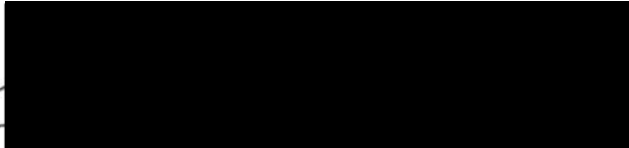
The undersigned agree to Respondent's attached Surrender of License and Order and to its proposed penalty, terms and conditions.

DATE: 9/24/15



DANIEL R. RYAN, ESQ.  
SMITH, SOVIK, KENDRICK & SUGNET  
Attorneys for Respondent

DATE: 9/24/15



TIMOTHY J. MAHAR  
Associate Counsel  
Bureau of Professional Medical Conduct

DATE: 9/24/15



For

KEITH W. SERVIS  
Director  
Office of Professional Medical Conduct

**IN THE MATTER**  
**OF**  
**DILIP KUMAR ROY, M.D.**

STATEMENT  
OF  
CHARGES

Dilip Kumar Roy, M.D., the Respondent, was authorized to practice medicine in New York State on or about January 6, 2000, by the issuance of license number 216564 by the New York State Education Department.

**FACTUAL ALLEGATIONS**

A. Respondent provided medical care to Patient A during the period from January 2015 through April 2015 at his offices located at Fastcare Family Medical, 941 South 1<sup>st</sup> Street, Fulton New York 13069 for hypothyroidism, among other conditions. Respondent's conduct towards Patient A deviated from accepted standards of medical care as follows:

1. Respondent on March 20, 2015 rubbed Patient A's thigh over clothes as she stood on a scale to be weighed for no valid medical purpose.
2. Respondent hugged Patient A in an inappropriate manner in the exam room one or more times on March 20, 2015.
3. Respondent held Patient A's hand in the exam room even after she attempted to withdraw her hand from his grasp on March 20, 2015.
4. Respondent kissed Patient A's cheek after Patient A turned her mouth away to avoid contact with Respondent's mouth on March 20, 2015.
5. Respondent kissed Patient A on the lips on March 20, 2015, and/or Respondent kissed or attempted to kiss Patient A three separate times on March 20, 2015.

6. Respondent failed to maintain an adequate and/or accurate medical record for Patient A.
- B. Respondent provided medical care to Patient B during the period from July 2011 through October, 2014 at his offices for anxiety and depression, among other conditions. Respondent's conduct towards Patient B deviated from accepted standards of medical care as follows:
1. Respondent on one or more occasions rubbed patient B's knee and/or thigh for no valid medical reason.
  2. Respondent on one or more occasions hugged Patient B inappropriately and/or rubbed her back down to the level just above her buttocks for no valid medical reason.
  3. Respondent on one or more occasions would run his fingers through Patient B's hair and/or would lean in and attempt to kiss her during office visits for medical care.
  4. Respondent in or about October 2014 rubbed Patient B's inner thigh over her clothes all the way to her groin for no valid medical reason.
  5. Respondent in or about October 2014 hugged Patient B inappropriately and/or held her against his groin, and /or kissed her, and/or attempted to insert his tongue into Patient B's mouth. Patient B pushed Respondent away and/or stated to him "No" or used words of similar effect.
  6. Respondent failed to maintain an adequate and/or accurate medical record for Patient B.
- C. Respondent provided medical care to Patient C during the period from November, 2012 through April, 2015 at his offices for back pain, among other conditions. Respondent's conduct towards Patient C deviated from accepted standards of medical care as follows:
1. Respondent performed an act of sexual intercourse on Patient C at his offices on or about March 10, 2015.
  2. Respondent refused to yield to Patient C's statements on or about March 10, 2015, " I don't want this [sexual intercourse]." and/or "I did not come here for this



[sexual intercourse]. " or used words of similar effect, among other statements Patient C made to Respondent that she did not want to engage in sexual intercourse with him.

3. Respondent failed to maintain an adequate and/or accurate medical record for Patient C.

D. Respondent provided medical care to Patient D during the period from August, 2011 through February, 2014 at his offices for scoliosis and thyroiditis, among other conditions. Respondent's conduct towards Patient D deviated from accepted standards of medical care as follows:

1. Respondent on one or more occasions kissed Patient D on the lips and/or on one occasion inserted his tongue in Patient D's mouth in or about January or February 2014 during the course of an examination.
2. Respondent rubbed Patient D's clothed breasts at the conclusion of an examination in or about February 2014.
3. Respondent asked Patient D if he could see her outside of the office in or about January or February 2014.
4. Respondent, on one or more occasions, stroked Patient D's hair and/or rubbed her shoulders during office visits.
5. Respondent failed to maintain an adequate and/or accurate medical record for Patient D.

E. Respondent provided medical care to Patient E during the period from December, 2014 to February, 2015 for back pain, among other conditions. Respondent's conduct towards Patient E deviated from accepted standards of medical care as follows:

1. Respondent inappropriately partially disrobed Patient E to inspect a surgical scar on her lower back.
2. Respondent at the conclusion of the exam grabbed Patient E's wrist and/or pulled her against his body.
3. Respondent at the conclusion of an exam hugged Patient E in an inappropriate manner.
4. Respondent rubbed Patient E's clothed buttocks without a medical purpose.

5. Respondent grabbed Patient E's wrist and/or kissed her cheek during which time Patient E turned her mouth away to avoid contact with Respondent's mouth.
6. Respondent failed to maintain an adequate and/or accurate medical record for Patient E.

F. Respondent provided medical care to Patient F during the period from April, 2014 through April, 2015 at his office for hypertension and/or anemia, among other conditions. Respondent's conduct towards Patient deviated from accepted standards of care as follows:

1. Respondent on one or more occasions rubbed Patient F's knee for no valid medical purpose during office visits for medical care.
2. Respondent on one or more occasions hugged Patient F inappropriately during office visits for medical care.
3. Respondent on one or more occasions kissed Patient F on the cheek during office visits for medical care.
4. With Patient F lying on the examination table, Respondent on one or more occasions lifted Respondent's shirt above her breasts, so as to expose her breasts, for no valid medical purpose. After exposing Patient F's breasts, Respondent performed or attempted to perform an abdominal exam. Patient F was wearing a bra at the time her breasts were exposed.
5. Respondent failed to maintain an adequate and/or accurate medical record for Patient F.

G. Respondent provided medical care to Patient G at his offices for sinusitis, among other conditions during the period including March 4, 2013 through April 13, 2015. Respondent's conduct towards Patient G deviated from accepted standards of medical care as follows:

1. Respondent, in or about April, 2015, during an office visit for medical care, rubbed and/or held Patient G's arm and/or hand in a manner that had no medical indication.

2. Respondent, in or about April, 2015, hugged Patient G in an inappropriate manner during an office visit for medical care.
3. Respondent failed to maintain an adequate and/or accurate medical record for Patient G.

H. Respondent provided medical care to Patient H during the period from 2005 through 2015 in his offices for chest and hip pain, among other conditions.

Respondent's conduct towards Patient H deviated from accepted standards of medical care as follows:

1. Respondent on one or more occasions hugged Patient H in an inappropriate manner during office visits for medical care.
2. Respondent performed what he told Patient H was a breast examination in an inappropriate manner.
3. Respondent placed his ungloved finger or fingers in Patient H's mouth and/or inside her lip for no valid medical reason.
4. Respondent on one or more occasions held Patient H's hand and/or rubbed her fingers during office visits.
5. Respondent failed to maintain an adequate and/or accurate medical record for Patient H.

### SPECIFICATION OF CHARGES

#### FIRST THROUGH EIGHTH SPECIFICATIONS

#### WILFULL PHYSICAL AND VERBAL ABUSE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(31) by having willfully harassed, abused or intimidated a patient physically and/or verbally as alleged in the following facts:

1. The facts as alleged in paragraphs A and A.1 and/or A and A.2, and/or A and A.3, and A and A.4, and/or A and A.5.
2. The facts as alleged in paragraphs B and B.1, and/or B and B.2, B and/or B.3, and/or B and B.4, and/or B and B.5.
3. The facts as alleged in paragraphs C and C.1, and/or C and C.2.
4. The facts as alleged in paragraphs D and D.1, and/or D and D.2, and/or D and D.3, and/or D and D.4.
5. The facts as alleged in paragraphs E and E.1, and/or E and E.2, and/or E and E.3, and/or E and E.4, and/or E and E.5.
6. The facts as alleged in paragraphs F and F.1, and/or F and F.2, and/or F and F.3, and/or F and F.4.
7. The facts as alleged in paragraphs G and G.1, and/or G and G.2.
8. The facts as alleged in paragraphs H and H.1, H and H.2, and/or H and H.3, and/or H and H.4.

### NINTH THROUGH SIXTEENTH SPECIFICATIONS

#### MORAL UNFITNESS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(20) by engaging in conduct in the practice of medicine which evidences moral unfitness to practice medicine as alleged in the following facts:

9. The facts as alleged in paragraphs A and A.1 and/or A and A.2, and/or A and A.3, and/or A and A.4, and/or A and A.5.
10. The facts as alleged in paragraphs B and B.1, and/or B and B.2, and/or B and B.3, and/or B and B.4, and/or B and B.5.
11. The facts as alleged in paragraphs C and C.1, and/or C and C.2.
12. The facts as alleged in paragraphs D and D.1, and/or D and D.2, and/or D and D.3, and/or D and D.4.

13. The facts as alleged in paragraphs E and E.1, and/or E and E.2, and/or E and E.3, and/or E and E.4, and/or E and E.5.
14. The facts as alleged in paragraphs F and F.1, and/or F and F.2, and/or F and F.3, and/or F and F.4.
15. The facts as alleged in paragraphs G and G.1, and/or G and G.2.
16. The facts as alleged in paragraphs H and H.1, and/or H and H.2, and/or H and H.3, and/or H and H.4.

### SEVENTEENTH 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 facts of:

17. The facts as alleged in two or more of the following paragraphs: A and A.1, and/or A and A.2, and/or A and A.3, and/or A and A.4, and/or A and A.5, and/or A and A.6, and/or B and B.1, and/or B and B.2, and/or B and B.3, and/or B and B.4, and/or B and B.5, and/or B and B.6, and/or C and C.1, and/or C and C.2, and/or C and C.3, and/or D and D.1, and/or D and D.2, and/or D and D.3, and/or D and D.4, and/or D and D.5, and/or E and E.1, and/or E and E.2, and/or E and E.3, and/or E and E.4, and/or E and E.5, and/or E and E.6, and/or F and F.1, and/or F and F.2, and/or F and F.3, and/or F and F.4, and/or F and F.5, and/or G and G.1, and/or G and G.2, and/or G and G.3, and/or H and H.1, and/or H and H.2, and/or H and H.3, and/or H and H.4, and/or H and H.5.

**EIGHTEENTH 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 facts of:

18. The facts as alleged in two or more of the following paragraphs: A and A.1, and/or A and A.2, and/or A and A.3, and/or A and A.4, and/or A and A.5, and/or A and A.6, and/or B and B.1, and/or B and B.2, and/or B and B.3, and/or B and B.4, and/or B and B.5, and/or B and B.6, and/or C and C.1, and/or C and C.2, and/or C and C.3, and/or D and D.1, and/or D and D.2, and/or D and D.3, and/or D and D.4, and/or D and D.5, and/or E and E.1, and/or E and E.2, and/or E and E.3, and/or E and E.4, and/or E and E.5, and/or E and E.6, and/or F and F.1, and/or F and F.2, and/or F and F.3, and/or F and F.4, and/or F and F.5, and/or G and G.1, and/or G and G.2, and/or G and G.3, and/or H and H.1, and/or H and H.2, and/or H and H.3, and/or H and H.4, and/or H and H.5.

**NINETEENTH THROUGH TWENTY-SIXTH SPECIFICATIONS**

**GROSS NEGLIGENCE**

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(4) by practicing the profession of medicine with gross negligence on a particular occasion as alleged in the facts of the following:

19. The facts as alleged in paragraphs A and A.1, and/or A and A.2, and/or A and A.3, and/or A and A.4, and/or A and A.5.
20. The facts as alleged in paragraphs B and B.1, and/or B and B.2, and/or B and B.3, and/or B and B.4, and/or B and B.5.
21. The facts as alleged in paragraphs C and C.1, and/or C and C.2.

22. The facts as alleged in paragraphs D and D.1, and/or D and D.2, and/or D and D.3, and/or D and D.4.
23. The facts as alleged in paragraphs E and E.1, and/or E and E.2, and/or E and E.3, and/or E and E.4, and/or E and E.5.
24. The facts as alleged in paragraphs F and F.1, and/or F and F.2, and/or F and F.3, and/or F and F.4.
25. The facts as alleged in paragraphs G and G.1, and/or G and G.2.
26. The facts as alleged in paragraphs H and H.1, and/or H and H.2, and/or H and H.3, and/or H and H.4.

### **TWENTY-SEVENTH THROUGH THIRTY-FOURTH SPECIFICATIONS**

#### **GROSS INCOMPETENCE**

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(6) by practicing the profession of medicine with gross incompetence as alleged in the facts of the following:

27. The facts as alleged in paragraphs A and A.1, and/or A and A.2, and/or A and A.3, and/or A and A.4, and/or A and A.5.
28. The facts as alleged in paragraphs B and B.1, and/or B and B.2, and/or B and B.3, and/or B and B.4, and/or B and B.5.
29. The facts as alleged in paragraphs C and C.1, and/or C and C.2.
30. The facts as alleged in paragraphs D and D.1, and/or D and D.2, and/or D and D.3, and/or D and D.4.
31. The facts as alleged in paragraphs E and E.1, and/or E and E.2, and/or E and E.3, and/or E and E.4, and/or E and E.5.
32. The facts as alleged in paragraphs F and F.1, and/or F and F.2, and/or F and F.3, and/or F and F.4.

33. The facts as alleged in paragraphs G and G.1, and/or G and G.2.

34. The facts as alleged in paragraphs H and H.1, and/or H and H.2, and/or H and H.3, and/or H and H.4.

### THIRTY-FIFTH THROUGH FORTY-SECOND SPECIFICATIONS

#### FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(32) by failing to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient, as alleged in the facts of:

35. The facts as alleged in paragraphs A and A.6.

36. The facts as alleged in paragraphs B and B.6.

37. The facts as alleged in paragraphs C and C.3.

38. The facts as alleged in paragraphs D and D.5.

39. The facts as alleged in paragraphs E and E.6.

40. The facts as alleged in paragraphs F and F.5.

41. The facts as alleged in paragraphs G and G.3.

42. The facts as alleged in paragraphs H and H.5.



DATE: August 31, 2015  
Albany, New York



MICHAEL A. HISER  
Deputy Counsel  
Bureau of Professional Medical Conduct

## EXHIBIT "B"

### Requirements for Closing a Medical Practice Following a Revocation, Surrender, Limitation or Suspension of a Medical License

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.
2. Within 5 days of the Order's effective date, Licensee shall deliver Licensee's original license to practice medicine in New York State and current biennial registration 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 notify all patients of the cessation or limitation 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 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 person 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 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 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 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, 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 for 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.