



## Department of Health

ANDREW M. CUOMO  
Governor

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

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

August 5, 2019

**CERTIFIED MAIL - RETURN RECEIPT REQUESTED**

John Thomas Viti  
Associate Counsel  
New York State Department of Health  
Bureau of Professional Medical Conduct  
90 Church Street, 4<sup>th</sup> Floor  
New York, New York 10007

John G. Martin, Esq.  
Garfunkel Wild, P.C.  
111 Great Neck Road  
Great Neck, New York 11021

Lawrence Womack, M.D.  


**RE: In the Matter of Lawrence Womack, M.D.**

Dear Parties:

Enclosed please find the Determination and Order (No. 19-200) of the Hearing Committee in the above referenced matter. This Determination and Order shall be deemed effective upon the receipt or seven (7) days after mailing by certified mail as per the provisions of §230, subdivision 10, paragraph (h) of the New York State Public Health Law.

As prescribed by the New York State Public Health Law §230, subdivision 10, paragraph (i), (McKinney Supp. 2015) and §230-c subdivisions 1 through 5, (McKinney Supp. 2015), "the determination of a committee on professional medical conduct may be reviewed by the Administrative Review Board for professional medical conduct." Either the Respondent or the Department may seek a review of a committee determination.

All notices of review must be served, by certified mail, upon the Administrative Review Board and the adverse party within fourteen (14) days of service and receipt of the enclosed Determination and Order.

The notice of review served on the Administrative Review Board should be forwarded to:

James F. Horan, Esq., Chief Administrative Law Judge  
New York State Department of Health  
Bureau of Adjudication  
Riverview Center  
150 Broadway – Suite 510  
Albany, New York 12204

The parties shall have 30 days from the notice of appeal in which to file their briefs to the Administrative Review Board.

Six copies of all papers must also be sent to the attention of Judge Horan at the above address and one copy to the other party. The stipulated record in this matter shall consist of the official hearing transcript(s) and all documents in evidence.

Parties will be notified by mail of the Administrative Review Board's Determination and Order.

Sincerely,

A solid black rectangular redaction box covering the signature of James F. Horan.

James F. Horan  
Chief Administrative Law Judge  
Bureau of Adjudication

JFH: cmg  
Enclosure

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

IN THE MATTER  
OF  
LAWRENCE WOMACK, M.D.

DETERMINATION  
AND  
ORDER  
19-200

This case was brought by the New York State Department of Health, Bureau of Professional Medical Conduct (“Department”). A Notice of Hearing (“NOH”) and Statement of Charges (“SOC”), both dated August 30, 2018, were served on Lawrence Womack, M.D. (“Respondent”). An Answer, dated December 28, 2018, was submitted by Respondent<sup>1</sup>. The NOH and SOC are attached to this Determination and Order as Appendix 1, and the Answer as Appendix 2. A hearing, pursuant to N.Y. Public Health Law (“PHL”) §230 and New York State Admin. Proc. Act §§301-307 and 401, was held at the Department’s offices at 90 Church Street, New York, New York. Steven I. Sherman, D.O., Chair, Florence Kavalier, M.D., and Curtis Hart, M. Div., duly designated members of the State Board for Professional Medical Conduct (“Board”), served as the Hearing Committee (“Committee”) in this matter. Ann H. Gayle served as the Administrative Officer. The Department appeared by Richard J. Zahnleuter, General Counsel, by John Thomas Viti, Associate Counsel. Respondent appeared by John G. Martin, Esq., Garfunkel Wild, P.C. Evidence was received and a transcript (pages 1-327) of this hearing was made and is part of the record.

After consideration of the entire record, the Committee issues this Determination and Order; all findings, conclusions, and determinations are unanimous.

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<sup>1</sup> *The Department objected to the ALJ’s acceptance of Respondent’s Answer.*

### PROCEDURAL HISTORY

Service of NOII and SOC:	September 24, 2018
Answer Filed:	January 4, 2019
Pre-Hearing Conference Dates:	November 15, 2018, November 20, 2018, and January 14, 2019
Hearing Dates:	November 20, 2018 <sup>2</sup> , January 14, 2019, and February 26, 2019
Witnesses for Department:	Patrick McBride and Garry Mowbray
Witness for Respondent:	Respondent
Deliberations Date:	June 18, 2019

### STATEMENT OF THE CASE

The Department charged Respondent with five specifications of professional misconduct under N.Y. Educ. Law §6530, to wit: First Specification: §6530(9)(c): having had disciplinary action taken; Second Specification: §6530(28): failing to respond; Third Specification: §6530(23): revealing of personally identifiable facts; Fourth Specification: §6530(16): failing to comply with state law; and Fifth Specification: §6530(21): failure to file report. Respondent denied each of the allegations in the First, Third, Fourth and Fifth Specifications. As to the Second Specification, Respondent “note[d] that he did provide an interview.” (Exhibit A)

### FINDINGS OF FACT

Citations in parentheses, which refer to transcript page numbers (“T”) and exhibits (“Ex”) that were accepted into evidence, represent evidence found persuasive by the Committee in

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<sup>2</sup> Respondent appeared pro se on this date and asked for an adjournment in order to seek legal representation. Over the Department’s objection, the Committee, pursuant to PHL §230.10(f), granted Respondent’s adjournment request, and the hearing was scheduled to commence on January 7 or 14, 2019.

arriving at a particular finding. Conflicting evidence, if any, was considered and rejected in favor of the cited evidence.

1. On October 18, 2001, by the issuance of license number 223075 by the New York State Education Department, Respondent, Lawrence Womack, M.D., was authorized to practice medicine in New York State. (Ex 3; Ex 5)
2. On November 4, 2014, the United States of America (“USA”) brought a civil action seeking penalties and injunctive relief under the Controlled Substances Act against Respondent (“Federal Civil Action”). The Complaint alleged, in part, that “between January 2011 through and including July 2013, [Respondent] wrote 241 purported prescriptions for Schedule II controlled substances, specifically oxycodone, methadone and fentanyl” and that “none of the purported prescriptions ... was written by [Respondent] for a legitimate medical purpose, in the usual course of professional practice, in violation of 21 U.S.C. §829(a) and 21 C.F.R. §1306.04(a)” (Ex 20, circled page 8). (Ex 20, circled pages 7-14)
3. On October 14, 2015, Respondent and the USA entered into a Consent Judgment in the Federal Civil Action (“Consent Judgment”). Respondent agreed to be, and he is, permanently enjoined from prescribing, dispensing, administering or distributing a Schedule II controlled substance. Respondent is permitted to so prescribe for a patient who is currently an in-patient at a hospital while he is working on the premises of that hospital, but he is specifically prohibited from prescribing a Schedule II controlled substance to a patient in a nursing home. Respondent further agreed to be, and he is, beginning on or about October 14, 2015, enjoined for a period of five years from prescribing, dispensing, administering or distributing a Schedule III controlled substance, except he is permitted to

prescribe testosterone and Tylenol with codeine as needed to treat patients. (Ex 20, circled pages 1-6)

4. On May 26, 2016, and July 25, 2016, the Department sent Respondent letters requesting patient files that were part of the Federal Civil Action. The May 26 letter was returned as “unclaimed unable to forward” and the July 25 letter was returned as “unclaimed unable to forward.” (Ex 6; Ex 7; T 50-52)
5. On September 23, 2016, and January 4, 2017, the Department sent additional letters to Respondent requesting the same patient records. The September 23 letter was received by Respondent on September 28, 2016, and the January 4 letter was delivered on January 7, 2017. Respondent never replied to these letters. (Ex 8; Ex 9; T 52-54)
6. On August 9, 2017, the Department sent another letter to Respondent requesting patient records. Respondent specifically requested that this letter be sent to the indicated address. The letter was delivered on August 11, 2017. Respondent did not reply to this letter. (Ex 16; Ex 17; T 69, 74-75)
7. Each of the aforesaid letters was sent to a correct address of Respondent. (T 247-248)
8. Respondent admitted that he did receive written communications asking for medical records. (T 228-229)
9. Respondent admitted that he did not respond to the letters or produce the requested records. (T 229, 308)

**FACTUAL ALLEGATIONS NOT SUSTAINED**

The Department charged Respondent as follows:

- C. Upon information and belief on or about May of 2017, over 500 medical records as well as medical waste, from Respondent’s office, were found dumped in a vacant lot and an abandoned building in the Town of Islip, New York.

1. Respondent revealed personally identifiable facts, data or information obtained in a professional capacity without the prior consent of the patients.
2. Respondent failed to properly dispose of regulated medical waste, as required pursuant to PIIL 1389 aa-gg.

The Department did not charge Respondent with having dumped the medical records and waste but contends that Respondent was responsible or at least could/should have done more to secure the medical waste and protect the records. The Committee found Respondent's testimony that he installed locks with unreproducible keys and periodically visited the premises credible and persuasive proof that Respondent took reasonable efforts to secure the building where the medical records and waste was stored, and therefore, could not be held accountable for the dumping and any consequences that arose therefrom. There was no police investigation, and it was never determined who dumped the records and waste around or after the time of the foreclosure of Respondent's medical office building. The Committee credited Respondent's testimony that the first time he knew of the foreclosure of his building where the records and waste was stored was when he heard from the Department. (T 113-114, 127, 128, 130-131, 195, 225, 226-228, 262-263)

The Committee did not sustain factual allegations C, C.1., and C.2.

#### CONCLUSIONS OF LAW

The Department initially charged Respondent with five specifications of professional misconduct under N.Y. Educ. Law §6530. Educ. Law §6530 reads in pertinent part:

#### **§6530. Definitions of professional misconduct**

Each of the following is professional misconduct...

- ...
- 9(c). Having been found guilty in an adjudicatory proceeding of violating a state or federal statute or regulation, pursuant to a final decision or determination, and when no appeal is pending, or after resolution of the proceeding by stipulation or agreement, and when the violation

would constitute professional misconduct. **First Specification**

...

16. A willful or grossly negligent failure to comply with substantial provisions of federal, state, or local laws, rules, or regulations governing the practice of medicine.<sup>3</sup> **Fourth Specification**

...

21. Willfully making or filing a false report, or failing to file a report required by law or by the department of health or the education department... **Fifth Specification**

...

23. Revealing personally identifiable facts, data, or information obtained in a professional capacity without the prior consent of the patient... **Third Specification**

...

28. Failing to respond within thirty days to written communications from the department of health... **Second Specification**

The Committee sustains the first and second specifications. The third and fourth specifications relate to factual allegations C, C.1., and C.2., which were not sustained by the Committee. Accordingly, the third and fourth specifications are not sustained. The Department withdrew the fifth specification<sup>4</sup>.

#### **First Specification**

A licensee commits professional misconduct pursuant to Educ. Law §6530(9)(c) by having been found guilty in an adjudicatory proceeding of violating a state or federal statute or regulation, pursuant to a final decision or determination, and when no appeal is pending, or after resolution of the proceeding by stipulation or agreement, and when the violation would constitute professional misconduct<sup>5</sup>. An adjudicatory proceeding was brought against Respondent by the

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<sup>3</sup> The law the Department cited was PHL §1388 aa-gg.

<sup>4</sup> The hearing ended on February 26, 2019; in an email dated March 5, 2019, the Department informed the ALJ and Respondent's counsel that "the Department is dropping the Physician Profile Charge against Respondent."

<sup>5</sup> The Department charged that the violation with which Respondent was charged, i.e., having allegedly written Schedule II controlled substances, specifically for oxycodone, methadone, and fentanyl, none of which were for a legitimate medical purpose, in the usual course of professional practice, in violation of 21 U.S.C. §§ 829(a) and 843(a)(1) and 21 C.F.R. §1306.04(a), would violate PHL §§6530(3) and/or (16). The Committee agrees.



USA. Respondent resolved that adjudicatory proceeding in a Consent Judgment with the USA. Respondent was not found guilty in that adjudicatory proceeding; the Consent Judgment reads, Respondent “does not admit to, and denies, committing any of the violations of law alleged in the complaint of the United States” and “Nothing herein shall be construed as an admission or finding of wrongdoing on the part of [Respondent].” (Exhibit 20, circled pages 1-2 and 4). Respondent argues that the Department erroneously charged him with misconduct pursuant to §6530.9(c) because there was no finding of guilt and because the adjudicatory proceeding he resolved with the USA does not constitute “having disciplinary action taken” as charged by the Department. The Committee reads the language in §6530.9(c) “or after resolution of the proceeding by stipulation or agreement” as separate and distinct from the earlier language in that section “having been found guilty in an adjudicatory proceeding ... pursuant to a final decision or determination.” The Committee believes “having been found guilty” applies when that finding of guilt is “pursuant to a final decision or determination” and that “or after resolution of the proceeding” is not linked to or dependent upon “having been found guilty ... pursuant to a final decision or determination.” The Consent Judgment constituted a “resolution of the proceeding” not a “decision or determination.”

Furthermore, pursuant to the Consent Judgment, Respondent is permanently enjoined from prescribing, dispensing, administering or distributing a Schedule II controlled substance, except under limited circumstances, and, beginning on or about October 14, 2015, Respondent is enjoined for a period of five years from prescribing, dispensing, administering or distributing a Schedule III controlled substance, except he is permitted to prescribe testosterone and Tylenol with codeine as needed to treat patients. (Exhibit 20, circled page 3). The Committee believes these permanent and five-year enjoinders constitute disciplinary action.

The first specification is sustained.

### **Second Specification**

A licensee commits professional misconduct pursuant to Educ. Law §6530(28) by failing to respond within thirty days to written communications from the department of health. By letters dated May 26, 2016, July 25, 2016, September 23, 2016, January 4, 2017, and August 9, 2017, an OPMC investigator sent Respondent letters demanding copies of the complete medical records of several of Respondent's patients. The letters, which were sent to various addresses (three in total) that the Department had for Respondent, informed Respondent that "[N. Y. Educ. Law] Section 6530(28) requires that you comply with this demand. Failure to do so may be considered misconduct. You must respond to this demand and provide the required records within 30 days of receipt of this letter." (Exhibits 6, 7, 8, 9, and 16).

Respondent did not provide the demanded records within 30 days of the receipt of the letters; in fact, when the SOC was served on him in September 2018, he still had not provided the records demanded in 2016 and 2017<sup>6</sup>.

The second specification is sustained.

### **DISCUSSION AND DETERMINATION AS TO PENALTY**

The Department is seeking "nothing less than revocation" of Respondent's license. Respondent requests that the Committee "decline to revoke or suspend his license, decline to impose any sanctions, and instead direct him to comply with any existing or further requests for records from the Department, to the extent he has not done so. In the alternative, any sanction imposed should be minimal, such as a requirement that [he] pursue a course of education or training or a requirement that he perform public service." (Department's and Respondent's post

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<sup>6</sup> *In early 2019, Respondent began to submit incomplete sets of some of the records requested in 2016 and 2017. (T' 236-239)*

hearing submissions)

The Committee, having considered the full range of penalties available pursuant to PHL §230-a, determined the appropriate penalty for Respondent's wrongdoing to be (1) a censure and reprimand, (2) a limitation on Respondent's license consistent with the Consent Judgment's enjoinders, and (3) a requirement to take an additional ten (10) hours of CME above and beyond the newly-required three-hour controlled substance CME. The Committee believes the censure and reprimand addresses Respondent's failure to comply with OMPC's demands for medical records, and the limitation and requirement for additional hours of education regarding controlled substances reinforces/substantiates Respondent's agreement in the Consent Judgment.

The Committee believes that a revocation is not warranted at this time as the significant penalty of restricting Respondent's license (coupled with the other penalties) provides ample protection of/for the public.

### ORDER

#### **IT IS HEREBY ORDERED THAT:**

1. The following charges of misconduct under Educ. Law §6530 are sustained:

Educ. Law §6530.9(c) – First Specification  
Educ. Law §6530.28 – Second Specification

2. The following charges of misconduct under Educ. Law §6530 are not sustained:

Educ. Law §6530.23 – Third Specification  
Educ. Law §6530.16 – Fourth Specification

3. Pursuant to PHL §230-a(1) Respondent shall be censured and reprimanded.
4. Pursuant to PHL §230-a(3) there shall be a permanent limitation on Respondent's license. Respondent shall not prescribe, dispense, administer or distribute a Schedule II controlled substance, but he is permitted to so prescribe for a patient who is currently an in-patient at a hospital while he is working on the premises of that hospital, however, he is specifically prohibited from prescribing a Schedule II controlled substance to a patient in a nursing home.

5. Pursuant to PHL §230-a(3) there shall be a limitation on Respondent's license beginning the effective date of this Order and continuing until and including October 14, 2020. Respondent shall not prescribe, dispense, administer or distribute a Schedule III controlled substance, except he is permitted to prescribe testosterone and Tylenol with codeine as needed to treat patients.
6. Pursuant to PHL §230-a(8), Respondent shall be required to pursue a course of education or training consisting of attendance and completion of ten (10) hours of CME in the area of controlled substances; this is in addition to the newly-required three-hour controlled substance course. Within 120 days of the effective date of this Order, Respondent must identify such CME or equivalent course and submit it to OPMC's Director for approval. Such course shall be taken and successfully completed the first time it is offered following OPMC's Director's approval.
7. This order shall be effective upon service on the Respondent as required under PHL §230.10(1).

DATED: Woodmere, New York  
August 2, 2019



STEVEN I. SHERMAN, D.O., Chair  
FLORENCE KAVALER, M.D.  
CURTIS HART, M. DIV.

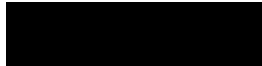
# APPENDIX 1

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

IN THE MATTER  
OF  
LAWRENCE WOMACK, M.D.

NOTICE  
OF  
HEARING

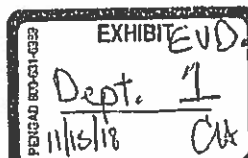
TO: LAWRENCE WOMACK, M.D.  
26 Railroad Avenue #205  
Babylon, NY 11702



PLEASE TAKE NOTICE:

A hearing will be held pursuant to the provisions of N.Y. Pub. Health Law §230 and N.Y. State Admin. Proc. Act §§301-307 and 401. The hearing will be conducted before a committee on professional conduct of the State Board for Professional Medical Conduct on November 20, 2018, at 10:00 a.m., at the Offices of the New York State Department of Health, 90 Church Street 4<sup>th</sup> Floor, New York, NY 10007, and at such other adjourned dates, times and places as the committee may direct.

At the hearing, evidence will be received concerning the allegations set forth in the Statement of Charges, which is attached. A stenographic record of the hearing will be made and the witnesses at the hearing will be sworn and examined. You shall appear in person at the hearing and may be represented by counsel who shall be an attorney admitted to practice in New York state. You have the right to produce witnesses and evidence on your behalf, to issue or have subpoenas issued on your behalf in order to require the production of witnesses and documents, and you may cross-examine witnesses



*Dept Ex 1*

and examine evidence produced against you. A summary of the Department of Health Hearing Rules is enclosed.

YOU ARE HEREBY ADVISED THAT THE ATTACHED CHARGES WILL BE MADE PUBLIC FIVE BUSINESS DAYS AFTER THEY ARE SERVED.

Department attorney: Initial here 

The hearing will proceed whether or not you appear at the hearing. Please note that requests for adjournments must be made in writing and by telephone to the New York State Department of Health, Division of Legal Affairs, Bureau of Adjudication, Riverview Center, 150 Broadway - Suite 510, Albany, NY 12204-2719, ATTENTION: HON. JAMES HORAN, DIRECTOR, BUREAU OF ADJUDICATION, (henceforth "Bureau of Adjudication"), (Telephone: (518-402-0748), upon notice to the attorney for the Department of Health whose name appears below, and at least five days prior to the scheduled hearing date. Adjournment requests are not routinely granted as scheduled dates are considered dates certain. Claims of court engagement will require detailed Affidavits of Actual Engagement. Claims of illness will require medical documentation.

Pursuant to the provisions of N.Y. Pub. Health Law §230(10)(c), you shall file a written answer to each of the charges and allegations in the Statement of Charges not less than ten days prior to the date of the hearing. Any charge or allegation not so answered shall be deemed admitted. You may wish to seek the advice of counsel prior to filing such answer. The answer shall be filed with the Bureau of Adjudication, at the address indicated above, and a copy shall be forwarded to the attorney for the Department of Health whose name appears below. Pursuant to §301(5) of the State Administrative Procedure Act, the

Department, upon reasonable notice, will provide at no charge a qualified interpreter of the deaf to interpret the proceedings to, and the testimony of, any deaf person. Pursuant to the terms of N.Y. State Admin. Proc. Act §401 and 10 N.Y.C.R.R. §51.8(b), the Petitioner hereby demands disclosure of the evidence that the Respondent intends to introduce at the hearing, including the names of witnesses, a list of and copies of documentary evidence and a description of physical or other evidence which cannot be photocopied.

At the conclusion of the hearing, the committee shall make findings of fact, conclusions concerning the charges sustained or dismissed, and in the event any of the charges are sustained, a determination of the penalty to be imposed or appropriate action to be taken. Such determination may be reviewed by the Administrative Review Board for Professional Medical Conduct.

THESE PROCEEDINGS MAY RESULT IN A DETERMINATION THAT YOUR LICENSE TO PRACTICE MEDICINE IN NEW YORK STATE BE REVOKED OR SUSPENDED, AND/OR THAT YOU BE FINED OR SUBJECT TO OTHER SANCTIONS SET OUT IN NEW YORK PUBLIC HEALTH LAW §§230-a. YOU ARE URGED TO OBTAIN AN ATTORNEY TO REPRESENT YOU IN THIS MATTER.

DATE: August 30, 2018  
New York, NY

  
Henry Weintraub  
Chief Counsel  
Bureau of Professional Medical Conduct



Inquiries should be directed to:  
John Thomas Viti  
Associate Counsel  
Bureau of Professional Medical Conduct  
90 Church Street, 4th Floor  
New York, NY 10007  
Ph: 212-417-4450

IN THE MATTER  
OF  
LAWRENCE WOMACK, M.D.

STATEMENT  
OF  
CHARGES

LAWRENCE WOMACK, M.D., the Respondent, was authorized to practice medicine in New York State on or about October 18, 2001, by the issuance of license number 223075 by the New York State Education Department.

**FACTUAL ALLEGATIONS**

- A. On or about October 14, 2015, The United States of America and Respondent entered a civil Consent Judgment, (the "Judgment"). The Judgment permanently enjoined the Respondent from prescribing, dispensing, administering or distributing a Schedule II controlled substance except while working on the premises of a hospital in accordance with hospital procedures. The Respondent was also enjoined for a period of five (5) years from prescribing, dispensing, administering or distributing a Schedule III controlled substance except testosterone and Tylenol with codeine. The Judgment was predicated on a Complaint, which Respondent does not admit to and denies, that between January 2011, through and including July 2013, the Respondent wrote 241 purported prescriptions for Schedule II controlled substances, specifically oxycodone, methadone and fentanyl for no legitimate medical purposes.

1. The conduct resulting in the Judgment would constitute misconduct under the laws of New York State, pursuant to the following sections of New York State Law:

a. New York Education Law § 6530(3) (Practicing the profession with negligence on more than one occasion.)

b. New York Education Law § 6530(16) (A willful or grossly negligent failure to comply with substantial provisions of federal, state, or local laws, rules or regulations, governing the practice of medicine.)

B. On or about May 26, 2016, July 25, 2016, September 23, 2016, January 4, 2017 and August 9, 2017, the New York State Department of Health Office of Professional Medical Conduct sent Medical Records Demand Letters to Respondent at various addresses.

1. As of the date of filing of these Charges, Respondent has failed to respond to said letters.

C. Upon information and belief on or about May of 2017, over 500 medical records as well as medical waste, from Respondent's office, were found dumped in a vacant lot and an abandoned building in the Town of Islip, New York.

1. Respondent revealed personally identifiable facts, data, or information obtained in a professional capacity without the prior consent of the patients.

2. Respondent failed to properly dispose of regulated medical waste, as required pursuant to New York Public Health Law 1389 aa-gg.

D. New York Public Health Law Article 29-D §2995-a requires the New York State Department of Health to collect certain information from New York State licensed physicians in order to create individual profiles on licensees in a format to be made available to the public. New York Public Health Law Article 29-D §2995-2, requires, in part, the licensees to "In addition to such periodic reports and providing the same information, each physician shall update his or her profile information within the six months prior to the expiration date of such physician's registration,

period...". On or about, October 14, 2015, Respondent entered into the Judgment which placed limitations on his ability to practice medicine; on or about January 10, 2017, Respondent updated his physician profile but failed to update said limitations.

1. As of January 10, 2017, Respondent has failed to provide the Information required to update his physician profile.

### SPECIFICATION OF CHARGES

#### FIRST SPECIFICATION

#### HAVING HAD DISCIPLINARY ACTION TAKEN

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(9)(c) Having been found guilty in an adjudicatory proceeding of violating a state or federal statute or regulation, pursuant to a final decision or determination, and when no appeal is pending, or after resolution of the proceeding by stipulation or agreement, and when the violation would constitute professional misconduct pursuant to this section, namely N.Y. Educ. Law §6530(3), and/or (16) as alleged in the facts of the following:

1. The facts in Paragraph A, A1 and its subparagraphs.

#### SECOND SPECIFICATION

#### FAILING TO RESPOND

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(28) by failing to respond within thirty days to written

communications from the department of health and to make available any relevant records with respect to an inquiry or complaint about the licensee's professional misconduct, as alleged in the facts of:

2. The facts in Paragraphs B and B1.

### THIRD SPECIFICATION

#### REVEALING OF PERSONALLY IDENTIFIABLE FACTS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(23) by revealing personally identifiable facts, data, or information obtained in a professional capacity without the prior consent of the patient, as alleged in the facts of:

3. The facts in Paragraphs C and C1.

### FOURTH SPECIFICATION

#### FAILURE TO COMPLY WITH STATE LAW

Respondent is charged with committing professional misconduct as defined in New York Education Law § 6530(16) by willful or grossly negligent failure to comply with substantial provisions of federal, state, or local laws, rules or regulations, governing the practice of medicine, as alleged in the facts of:

4. The facts in Paragraphs C, and C2.

**FIFTH SPECIFICATION**

**FAILURE TO FILE REPORT**

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(21) by willfully making or filing a false report, or failing to file a report required by law or by the department of health or the education department, as alleged in the facts of:

5. The facts in Paragraphs D and D1.

DATE: August 30, 2018

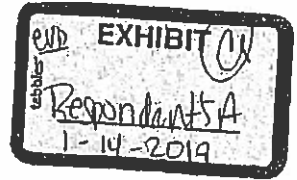
New York, New York



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Henry Weintraub  
Chief Counsel  
Bureau of Professional Medical Conduct

## APPENDIX 2



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

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ANSWER OF DR. WOMACK

IN THE MATTER  
OF  
LAWRENCE P. WOMACK, M.D.

Lawrence P. Womack, M.D., hereby answers the statement of charges in this matter as follows:

1. Allegations in Paragraph A: Dr. Womack denies the allegations in Paragraph A, except admits that he entered into a settlement as reflected in the Department's Exhibit 20, and submits that the document speaks for itself.
2. Allegations in Paragraph B: Dr. Womack denies the allegations in Paragraph B, except admits that letters were sent to him.
3. Allegations in Paragraph C: Dr. Womack denies the allegations in Paragraph C, and denies personal knowledge of the dumping alleged.
4. Allegations in Paragraph D: Dr. Womack denies the allegations in Paragraph D.

SPECIFICATIONS

5. First Specification: Dr. Womack denies the allegations in the First Specification.
6. Second Specification: Dr. Womack notes that he did provide an interview.



7. Third Specification: Dr. Womack denies the allegations in the Third Specification.

8. Fourth Specification: Dr. Womack denies the allegations in the Fourth Specification.

9. Fifth Specification: Dr. Womack denies the allegations in the Fifth Specification.

Dated: Great Neck, New York  
December 28, 2018



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JOHN G. MARTIN, ESQ.  
GARFUNKEL WILD, PC

To: John Thomas Viti  
Associate Counsel  
New York State Department of Health  
Bureau of Professional Medical Conduct  
90 Church Street, 4<sup>th</sup> Floor  
New York, New York 10007

John G. Martin, Esq.  
Garfunkel Wild, P.C.  
111 Great Neck Road  
Great Neck, New York 11021

Lawrence Womack, M.D.

