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

IN THE MATTER

APPLICATION TO MODIFY ORDER

OF

and SURRENDER LICENSE

ANTHONY HIRSCH, M.D.

BPMC # 03-125

ANTHONY HIRSCH, M.D., Respondent, states that I was authorized to practice medicine in New York State on February 28, 1967, by the issuance of License

No. 098440 by the New York State Education Department.

I am not currently registered with the New York State Education Department to practice in the State of New York. My address is 1915 Meiners Road, Ojai, CA 93023.

I am the subject of BPMC Order No. 03-125 annexed hereto, made a part hereof, and marked as Exhibit 1. I am applying to the State Board for Professional Medical Conduct for an Order (henceforth "Modification/Surrender Order"), modifying the original order with the surrender of my license to practice medicine in the State of New York. This application to modify the prior order is based upon the fact that I do not intend to return to medical practice in the State of New York, and upon the understanding that this modification/surrender order will be a revision of the original order, with the surrender predicated upon the same matter as was the original order. The modification/surrender order to be issued will not constitute a new disciplinary action against me, but will substitute license surrender the for sanction imposed by the original order.

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

I understand that, in the event that the 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.

I make this application to the Board and request that it be granted by execution by the Chairperson of the Board of the attached modification/surrender order. I agree that, in the event the Board grants my application, an order shall be issued striking my name from the roster of physicians in the State of New York without further notice to me.

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 Board's granting of this application to modify my prior order, I fully, freely waive any right I may have to appeal or otherwise challenge the validity of the said modification/surrender order.

DATE:9-15___, 2003

Respondent

The undersigned agree to the attached application of the Respondent to modify the original order and to surrender his license to practice medicine in the State of New York.

ANTHOMY M. BENIGNO Associate Counsel Bureau of Professional Medical Conduct

DENNIS J. GRAZIANO

Director
Office of Professional Medical Conduct

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

IN THE MATTER

: MODIFICATION/

OF

: SURRENDER ORDER

ANTHONY HIRSCH, M.D.

BPMC#

Upon the application of ANTHONY HIRSCH, M.D., (Respondent) to modify a prior order and to surrender his license as a physician in the State of New York, which application is made a part hereof, it is agreed to and

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

ORDERED, that Order BPMC No. 03-125 is modified to replace the sanction imposed with the surrender of Respondent's license to practice medicine in the State of New York; it is further

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

ORDERED, that this order shall take effect as of the date of the personal service of this order upon Respondent, upon receipt by Respondent of this order via certified mail, or seven days after mailing of this order via certified mail, whichever is earliest.

SO ORDERED

Dated: <u>9-24-63</u>

MICHAEL A. GONZALEZ, R.P.A.-C

Vice Chair

State Board for Professional Medical Conduct

New York State Board for Professional Medical Conduct

433 River Street, Suite 303 • Troy, New York 12180-2299 • (518) 402-0863

5/15/03Antonia 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

May 16, 2003

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Anthony Hirsch, M.D. 1915 Meiners Road Ojai, CA 93023

RE:

License No. 098440

Dear Dr. Hirsch:

Enclosed please find Order #BPMC 03-125 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect May 23, 2003.

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.

X

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

Executive Secretary

Board for Professional Medical Conduct

Enclosure

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

IN THE MATTER

CONSENT

OF

AGREEMENT

ANTHONY HIRSCH, M.D. CO-03-11-0315-A

AND ORDER

BPMC No. 03-125

ANTHONY HIRSCH, M.D., (Respondent) deposes and says:

That on or about February 28, 1967, I was licensed to practice as a physician in the State of New York, having been issued License No. 098440 by the New York State Education Department.

My current address is 1915 Meiners Road, Ojai, CA 93023, and I will advise the Director of the Office of Professional Medical Conduct of any change of my address within thirty (30) days thereof.

I understand that the New York State Board of Professional Medical Conduct has charged me with two (2) specifications of professional misconduct.

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

I do not contest Factual Allegations A and B(5) and the two (2) specifications, in full satisfaction of the charges against me. I, hereby, agree to the following penalties:

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 possess 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 licensee.

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 that I am charged with professional misconduct in the future, the 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.

AFFIRMED:

DATED: Ney 6, 2003

ANTHONY HIRSCH, M.D.

Respondent

The unde	rsigned agree to the	e attached application	of the Respondent ar	nd to the
proposed penalty	based on the term	s and conditions there	of.	

DATE: TO WATER

ROBERT BOGAN Associate Counsel

Bureau of Professional Medical Conduct

DATE: 9 444 2003

DENNIS J. GRAZIANO

Director

Office of Professional Medical Conduct

STATE OF NEW YORK : DEPARTMENT OF HEALTH				
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT				
IN THE MATTER	STATEMENT			
OF	OF			
ANTHONY HIRSCH, M.D. CO-03-11-0315-A	CHARGES			

ANTHONY HIRSCH, M.D., the Respondent, was authorized to practice medicine in New York state on February 28, 1967, by the issuance of license number 098440 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. On or about December 4, 2002, the Division of Medical Quality, Medical Board of California, Department of Consumer Affairs, (hereinafter "California Board"), by a Decision and Order (hereinafter "California Order"), publicly reprimanded Respondent and required him to pay \$4,612.64 costs of investigation and prosecution, based on general unprofessional conduct.
- B. The conduct resulting in the California Board disciplinary action against Respondent would constitute misconduct under the laws of New York State, pursuant to the following sections of New York State law:
 - 1. New York Education Law §6530 (3) (negligence on more than one occasion);
 - 2. New York Education Law §6530 (4) (gross negligence);
 - 3. New York Education Law §6530 (5) (incompetence on more than one occasion);
 - 4. New York Education Law §6530 (6) (gross incompetence); and/or
- 5. New York Education Law §6530(32) (failure to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient).

SPECIFICATIONS FIRST SPECIFICATION

Respondent violated New York Education Law §6530(9)(b) by having been found guilty of improper professional practice of professional misconduct by a duly authorized professional disciplinary agency of another state where the conduct upon which the finding was based, would if committed in New York state, constitute professional misconduct under the laws of New York state, in that Petitioner charges:

1. The facts in Paragraphs A and/or B.

SECOND SPECIFICATION

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

1. The facts in Paragraphs A and/or B.

Albany, New York

Deputy Counsel Bureau of Professional **Medical Conduct**

NEW YORK STATE STATE BOARD FOR PROFESS		
IN THE M	ATTER	CONSENT
OF		ORDER
ANTHONY	HIRSCH, M.D.	

Upon the proposed agreement of **ANTHONY HIRSCH, M.D.,** (Respondent) for Consent Order, which application is made a part hereof, it is agreed 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.

 $DATED: \Box // \Box /0 = 0$

WILLIAM P. DILLON, M.D.

Chair

State Board for Professional Medical Conduct