

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

Dennis P. Whalen Executive Deputy Commissioner of Health Anne F. Saile, Director Office of Professional Medical Conduct William J. Comiskey, Chief Counsel Bureau of Professional Medical Conduct William P. Dillon, M.D. Chair Denise M. Bolan, R.P.A. Vice Chair Ansel Fi. Marks, M.D., J.D. Executive Secretary

December 23, 1998

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Mario G. Fiorilli, M.D. 105 Bayberry Court Roanoke Rapids, NC 27870

RE: License No. 122 180

Dear Dr. Fiorilli:

Enclosed please find Order **#BPMC 98-307** of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect **December 30, 1998.**

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: William D. White, Jr. James, Wellman & White 644 Roanoke Avenue P.O. Box 2018 Roanoke Rapids, NC 27870

Kevin Roe, Esq.

bcc: W. Comiskey R. Nernerson P. Van Buren C. Glynn J. Dawson Surrender File A. Bohenek K. Spooner

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

IN THE MATTER

OF

MARIO G. FIORILLI, M.D.

APPLICATION TO MODIFY PRIOR CONSENT ORDER BPMC 98-307

STATE OF NORTH CAROLINA) COUNTY OF)

MARIO G. FIORILLI, M.D., being duly sworn, deposes and says:

On or about October 15, 1974, I was licensed to practice as a physician in the State of New York, having been issued License No. 122180 by the New York State Education Department.

I am the subject of Order BPMC 96-11 annexed hereto, made part hereof, and marked as Exhibit 1. I am applying to the State Board for Professional Medical Conduct for an order (Modification/Surrender Order), to modify the original order and to surrender my license to practice medicine in the State of New York. This application to modify the original order is based on the fact that I do not intend to return to medical practice in the State of New York, and upon the understanding that the modification/surrender order will be a revision of the original order 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 for the sanction imposed by the original order.

I understand that, in the event that this application is not granted by the State Board for Professional Medical Conduct, 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 State Board for Professional Medical Conduct and request that it be granted by execution by the Chairperson of the State Board for Professional Medical Conduct of the attached Modification/Surrender Order. I agree that, in the event the State Board for Professional Medical Conduct 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 not under duress, compulsion or restraint of any kind or manner. In consideration of the Board's granting of this application, I fully, freely, and with the advice of counsel, waive any right I may have to appeal or otherwise challenge the validity of the Modification/Surrender Order.

MARIO G. FIORILLI. M.D.

RESPONDENT

Sworn to before me this

Ithday of Dec., 1998

fy Commission ExpiresJuly 22, 2003.

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.

Date: December 11, 1998

Date: 12/14/

WILLIAM 0. WHITE: ESQ.

Attorney for Respondent

KEVIN C. ROE Associate Counsel Bureau of Professional Medical Conduct

Date: December 17, 1998

Anne F. SA SE ILE

Director Office of Professional Medical Conduct

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

IN THE MATTER

OF

MARIO G. FIORILLI, M.D.

MODIFICATION / SURRENDER ORDER

Upon the Application of MARIO G. FIORILLI, M.D. (Respondent) to modify a prior order and 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 hereby adopted; it is further

ORDERED, that Order BPMC 96-I 12 is modified in that the sanction imposed pursuant to that Order shall be replaced by the surrender of Respondent's license to practice medicine in the State of New York; it is further

ORDERED, that the name of Respondent shall be stricken from the roster of physicians in the State of New York; 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: 12/2//98

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

EXHIBIT 1

 NEW YORK STATE
 DEPARTMENT OF HEALTH

 IN THE MATTER
 APPLICATION

 OF
 FOR

 MARIO GRAZIA FIORILLI, M.D.
 FOR

 STATE OF NORTH CAROLINA)
 SS.:

 COUNTY OF
)

MARIO GRAZIA FIORILLI, M.D., being duly sworn, deposes and says:

That on or about October 15, 1974, I was licensed to practice as a physician in the State of New York, having been issued License No. 122180 by the New York State Education Department.

My current address is 220 Smith Church Road, Roanoke Rapids, North Carolina 27820, 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 admit guilt to the specification, in full satisfaction of the charges against me. I hereby agree to the penalty that my license be suspended for one year, that said suspension be stayed and that I be placed on probation for a period of one year, subject to the terms of probation set forth in Exhibit "B". I further agree that I shall be ordered to renew and maintain current my registration with the New York State Education Department to practice as a physician and I shall submit proof of said registration within 60 days from the date of the consent order.

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 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.

(MM

MARIO GRAZIA FIORILLI, M.D. RESPONDENT

Sworn to before me this TO day of April, 1994 <u>Cancer of Across NOTARY PUBLIC</u>

NEW YORK STATE DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT IN THE MATTER APPLICATION OF FOR MARIO GRAZIA FIORILLI, M.D. CONSENT ORDER The undersigned agree to the attached application of the Respondent and to the proposed penalty based on the terms and conditions thereof Ci 12 DATE: MARIO GRAZIA FIORILLI, M.D. Respondent frank (DATE: JAMES F. FARRELL', JR., ESQ. Attorney for Respondent DATE: 4 1 a SILVIA PASTOR FINKELSTEIN Associate Counsel Bureau of Professional Medical Conduct 3

DATE: May (1994

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ANNE F. SAILE Acting Director Office of Professional Medical Conduct

DATE: <u>6 May 1996</u>

Charles J. Vacanti

CHARLES J. VACANTI, M.D. Chairperson State Board for Professional Medical Conduct

IN THE MATTER

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

NEW YORK STATE

OF

MARIO GRAZIA FIORILLI, M.D.

STATEMENT OF CHARGES

MARIO GRACIA FIORILLI, M.D., the Respondent, was authorized to practice medicine in New York State on or about October 15, 1974, by the issuance of license number 122180 by the New York State Education Department.

FACTUAL ALLEGATION3

Α. On or about January 8, 1993, the Board of Medical Examiners of the State of North Carolina (North Carolina Board) issued a Consent Order entered into by Respondent and the North Carolina Board, to resolve a Notice of Charges and Allegations issued against Respondent alleging violations of §§90-14(a)(1) and (6), General Statutes of North Carolina (N.C.Gen.Stat.), predicated upon Respondent having had a personal, sexual relationship with patient R.M.A. The Consent order suspended Respondents license for one year, stayed the suspension, and placed Respondent on probation for a period of one year requiring, inter alia, that Respondent complete 20 hours on the ethics of the physician-patient relationship. If committed in New York, this conduct would constitute professional misconduct under N.Y. Educ. Law §§ 6530 (20) (conduct in the practice of medicine which evidences moral unfitness to practice) and/or 6530(31) (willfully harassing, abusing, or intimidating a patient either physically or verbally).

SPECIFICATION OF CHARGES

SPECIFICATION HAVING HAD DISCIPLINARY ACTION TAKEN

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(9)(d)(McKinney Supp. 1995) by having his or her license to practice medicine revoked, suspended or having other disciplinary action taken, or having his or her application for a license refused, revoked or suspended or having voluntarily or otherwise surrendered his or her license after a disciplinary action was instituted by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the revocation, suspension or other disciplinary action involving the license or refusal, revocation or suspension of an application for a license would, if committed in New York state, constitute professional misconduct under the laws of New York state [namely N.Y. Educ. Law §6530(20) and/or (31)] as alleged in the facts of the following:

1. Paragraph A

DATED: December [>] ⁻, 1995 New York, New York

ROY NEMERSON Deputy Counsel Bureau of Professional Medical Conduct

EXHIBIT "B"

TERMS OF PROBATION

- 1. MARIO GRAZIA FIORILLI, M.D., during the period of probation, shall conduct himself/herself in all ways in a manner befitting his/her professional status, and shall conform fully to the moral and, professional standards of conduct imposed by law and by his/her profession;
- 2. Respondent shall submit written notification to the New York State Department of Health (NYSDOH), addressed to the Diractor, Office of Professional Medical Conduct, New York State Department of Health, CorningTower Building, 4th Floor, Empire State Plaza, Albany, NewYork 12237 of any employment and practice, of Respondent's residence and te lephone number, and of any change in Respondent's employment, practice residence, or telephone number within or without the State of New York;
- 3. Respondent shall submit written proof from the Division of Professional Licensing Services (DPLS) New York State Education Department (NYSED) that Respondent has paid all registration fees due and owing to the NYSED and Respondent shall cooperate with and submit whatever papers are requested by DPLS in regard to said registration fees said proof from DPLS to be submitted by Respondent to the New York State Department of Health, addressed to the Director, Office of Professional Medical Conduct, as aforesaid, within the first three months of the period of probation;
- 4. Respondent shall submit written proof to the NYSDOH, addressed to the Director, Office of Professional Medical Conduct as aforesaid, that 1) Respondent is currently registered with the NYSED. If Respondent is not currently registered with the NYSED to practice medicine, Respondent shall renew his registration and maintain it current and submit proof thereof, and that 2) Respondent has paid any fines which may have previously been imposed upon. Respondent by the Board or by the Board of Regents; said proof of the above to be submitted no later than the first two months of the period of probation;
- 5. Respondent shall comply with all terms, conditions, restrictions, and penalties to which he is subject pursuant to the order of the Board and shall assume and bear all costs related to compliance with the Terms of Probation;
- 6. Any civil penalty not paid by the date prescribed herein shall be subject to all provisions of law relatin to debt collection by the State of New York. This includes but is not4imiteJ to the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non renewal of permits or licenses (Tax Law §171(27); State Finance Law §18; CPLR §5001; Executive Law §32);
- 7. So long as there is full compliance with every term herein set forth: Respondent may continue to practice his or her aforementioned profession in accordance with the terms of probation; provided,

however, that upon receipt of evidence of nonconpliance with, or any violation of these terms, the Director of the Office of Professional Medical Conduct and/or the Board may initiate a violation of probation proceeding and/or such other proceedin a ainst Respondent as may be authorized pursuant to the 8 % lic Health Law.

The period of probation shall be tolled until and unless Respondent engages in the active practice of medicine in the State of New York. Respondent shall within 30 days of the effective date of this Consent Order, notify the Director of the Office of Professional Medical Conduct, in writing, as to whether or not he/she is so engaged. In the event that Respondent returns to the practice of medicine in the State of New York, Respondent shall notify the Director of the Office of Professional Medical Conduct of his intent to return to New York, 30 days prior to said return. Furthermore, until completion of the term of probation, he/she shall notify the Director, in writing, prior to any change in that status.

8.

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

IN THE MATTER

OF

MARIO GRAZIA FIORILLI, M.D.

CONSENT ORDER BPMC #96-112

Upon the application of MARIO GRAZIA FIORILLI, M.D. (Respondent) for Consent Order, which application is made a part hereof, it is

ORDERED, that the application and the provisions thereof are hereby adopted and so ORDERED, 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 by certified mail, whichever is earliest.

SO ORDERED.

DATED: 6 May 1996

CHARLES J. VACANTI, M.D. Chairperson State Board for Professional Medical Conduct