433 River Street, Suite 303

Troy, New York 12180-2299

Antonia C. Novello, M.D., M.P.H., Dr.P.H. Commissioner

Dennis P. Whalen
Executive Deputy Commissioner

December 27, 2001

# **CERTIFIED MAIL - RETURN RECEIPT REQUESTED**

Amy B. Merklen, Esq.
NYS Department of Health
ESP-Corning Tower-Room 2509
Albany, New York 12237

Salim Can Alkoc, M.D. 515 West 59<sup>th</sup> Street Apartment 18H New York, New York 10019

Salim Can Alkoc, M.D.
Sehit Muhtar Caddessi No. 12
Kat 5 Taksim 80080
Istanbul, Turkey

RE: In the Matter of Salim Can Alkoc, M.D.

### Dear Parties:

Enclosed please find the Determination and Order (No. 01-333) 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), and §230-c subdivisions 1 through 5, (McKinney Supp. 1992), "the determination of a committee on professional medical conduct may be reviewed by the Administrative Review Board for professional medical conduct." Either the licensee 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., Administrative Law Judge New York State Department of Health Bureau of Adjudication Hedley Park Place 433 River Street, Fifth Floor Troy, New York 12180

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 Mr. 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,

Tyrone T. Butler, Director Bureau of Adjudication

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

IN THE MATTER

OF

SALIM CAN ALKOC, M.D.

DECISION

AND

ORDER

OF THE

HEARING COMMITTEE

**ORDER NO. BPMC 01-**333



The undersigned Hearing Committee consisting of **ARSENIO G. AGOPOVICH, M.D.** CHAIRPERSON, **SHELDON GAYLIN, M.D.**, and **MS. VIRGINIA R. MARTY** was duly designated and appointed by the State Board for Professional Medical Conduct. **JONATHAN M. BRANDES, ESQ.**, Administrative Law Judge, served as Administrative Officer.

The hearing was conducted pursuant to the provisions of Section 230(10) of the New York State Public Health Law and Sections 301-307 and 401 of the New York State Administrative Procedure Act to receive evidence concerning alleged violations of provisions of Section 6530 of the New York Education Law by **SALIM CAN ALKOC, M.D.** (hereinafter referred to as "Respondent").

#### **RECORD OF PROCEEDING**

Notice of Hearing and Statement of Charges Signed /

Served

Dated:

Served: See

June 21, 2001

Discussion Below

Notice of Hearing returnable:

August 28, 2001

Location of Hearing:

Hedley Building, Troy N.Y.

Respondent's answer dated / served:

N/A

The State Board for Professional Medical Conduct (hereinafter referred to as "Petitioner" or "The State") appeared by:

DONALD P BERENS, Jr. General Counsel by AMY B. MERKLEN, ESQ.

Senior Attorney

Bureau of Professional Medical Conduct

Albany, New York 12237

Respondent did not appear in person and was not represented by counsel.

Respondent was last authorized to practice medicine in New York State in an authorized residency program at: St. Lukes Roosevelt Hospital Center

1000 Tenth Ave. New York, NY 10019

Respondent's Address

Sehit Muhtar Caddessi, No.12

Kat 5 Taksim 80080 Istanbul, Turkey

Respondent's License<sup>1</sup> Number and Registration Date

N/A

Pre-Hearing Conference Held:

N/A

Hearings held on:

August 28, 2001

Conferences held on:

N/A

Closing briefs received:

N/A

Record closed:

August 28, 2001

<sup>&</sup>lt;sup>1</sup>Respondent was never formally registered to practice medicine in this state. He did participate in an authorized residency program at the St. Luke's - Roosevelt Hospital Center in New York, NY. It was upon the authority granted him under the program that he obtained Alprazolam.

### **SUMMARY OF PROCEEDINGS**

The Statement of Charges in this proceeding alleges sixteen grounds of misconduct:

Specification Number	<u>Allegation</u>
First through Third	Engaging in conduct during the practice of medicine which evidences moral unfitness to practice medicine in violation of New York Education Law §6530 (20)
Fourth and Fifth	Practicing the Profession Fraudulently Respondent is charged with professional misconduct by reason of practicing the profession fraudulently in violation of N.Y. Education Law §6530(2)
Sixth Through Eighth	Willfully Failing to Follow State laws Governing the Practice of Medicine by violating Public Health Law Article 33 in violation of New York Education Law §6530(16)
Ninth and tenth	Willfully, harassing, abusing, or intimidating a patient either physically or verbally in violation of New York Education Law §6530 (31)
Eleventh and Twelfth	Practicing the profession with gross negligence on a particular occasion in violation of New York Education Law §6530 (4)
Thirteenth and Fourteenth	Practicing the Profession with negligence on more than one occasion in violation of New York Education Law §6530 (3)
Fifteenth and Sixteenth	Failing to maintain a record for each Patient which accurately reflects the evaluation and treatment of the patient in violation of New York Education Law §6530 (32)

The allegations are more particularly set forth in the Statement of Charges which is attached hereto as Appendix One.

Petitioner called Investigator Michael J. Waring as its sole witness.

Respondent defaulted and called no witnesses.

# **SIGNIFICANT LEGAL RULINGS:**

### PART ONE: The State Establishes Jurisdiction over Respondent

Pursuant to Part 230 (10) (d) of the Public Health Law, Petitioner must obtain personal service upon Respondent in order to establish jurisdiction over him. However, where personal service cannot be obtained after due diligence, jurisdiction can be established by sending the Notice of Hearing and Statement of Charges

to Respondent by registered or certified mail. The due diligence must be certified under oath. The address to which the documents must be mailed, is the "last known address by the board (sic)." (Public Health Law Part 230(10)(d))

In this case, Respondent listed two addresses. The first was in New York City. Diligent but unsuccessful efforts to serve Respondent personally in New York City were documented under oath. Later, service was attempted by Certified Mail. The documents sent to the New York City address were returned, unclaimed.

The second address for Respondent was in Istanbul, Turkey. Exhibit 2 establishes that Petitioner made a number of unsuccessful efforts to serve Respondent, personally, in Turkey. However, the certified mail containing the documents sent to the address in Turkey, were not returned. While diligent attempts at personal service followed by certified mail to the last known addresses of Respondent establishes jurisdiction, Petitioner did more. Exhibit 3 establishes that the documents were faxed to Respondent in Turkey. The routine fax report produced by the fax machine indicated that the fax had been received at the machine known to belong to Respondent. Therefore, the Administrative Law Judge found that the State had established jurisdiction over Respondent by taking further action than that required by the law.

#### Part Two: Respondent Is Found in Default

Part 230 (10)(c)(3) of the Public Health Law provides that "the licensee <u>shall appear personally</u> at the hearing and may be represented by counsel (emphasis supplied)." Respondent filed no answer and he did not appeared personally nor by counsel, in this proceeding. Therefore, the Administrative Law Judge ruled that Respondent was in default. Upon a finding of default, by operation of law, the charges and specifications are admitted by Respondent with the same force and effect as if the charges and specifications had been sustained by the Committee after an evidentiary hearing.

The Administrative Law Judge conferred with the members of the Committee and disclosed to them the facts stated above. The Administrative Law Judge explained the various rulings and their effect upon the proceedings. The Committee was told that upon the failure of Respondent to appropriately participate in the proceedings, each of the Specifications in the Notice of Hearing and Statement of Charges (see Exhibit 1)

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were deemed admitted by Respondent with the same force and effect as if the Committee had made the findings after an evidentiary hearing. Likewise, all statements of fact and the charges themselves, which were alleged in the Statement of Charges (Exhibit 1), were admitted by Respondent with the same force and effect as if the Committee had made the findings after an evidentiary hearing

The Committee deliberated on the issue of professional misconduct under Section 6530 of the New York Education Law. The Committee has considered the entire record in the above captioned matter and hereby renders its decision with regard to the charges of medical misconduct.

# **FINDINGS OF FACT**

- Respondent, was authorized to practice medicine in New York as a Resident at St. Luke's Roosevelt
  Hospital Center. The New York State Department of Education has not issued Respondent a license.
- 2. Sometime prior to May 23, 2000, Respondent obtained Alprazolam (a schedule IV controlled substance also identified as benzodiazepine Xanax), other than for legitimate medical purposes.
- 3. On, May 23, 2000, Respondent, at his apartment in Manhattan, New York, administered Alprazolam to Individual A without her knowledge or consent and for no legitimate medical purpose by means of an alcoholic beverage he served her.
- After administering Alprazolam to Individual A and after Individual A was sedated and rendered
   helpless, Respondent performed sexual acts on Individual A without her consent.

5. On May 23, 2000, at his Manhattan, New York, apartment and elsewhere, Respondent administered

Alprazolam to Individual B without her knowledge or consent and for no legitimate medical purpose

by means of an alcoholic beverage he served her.

6. After administering Alprazolam to Individual B in an alcoholic beverage and after Individual B was

sedated and rendered helpless, Respondent performed sexual acts on Individual B without her

consent.

7. On or about June 8, 2000, Respondent instructed Mr. Turker Sengul to destroy evidence, consisting

of video tapes, that would have been used in a professional misconduct proceeding, as well as, a

criminal proceeding.

CONCLUSIONS
WITH REGARD TO
FACTUAL ALLEGATIONS

Pursuant to the instructions of the Administrative Law Judge, the Committee finds that the factual

allegations are sustained with the same force and effect as if a full evidentiary hearing had been held and

the Committee had deliberated after same.

Therefore:

**EACH** Factual Allegation **IS SUSTAINED** 

**SPECIFICATIONS** 

As a result of the default by Respondent, the Committee must sustain all the allegations as findings

of fact. The Committee now turns its attention to whether any of the findings of fact constitute acts of

professional misconduct.

#### FIRST THROUGH THIRD SPECIFICATIONS

# (Conduct in the Practice of Medicine Which Evidences Moral Unfitness to Practice Medicine)

The Committee finds Respondent has committed medical misconduct by engaging in acts during the practice of medicine, which evidence moral unfitness to practice medicine in violation of New York Education Law §6530 (20).

To sustain an allegation of moral unfitness, the State must show Respondent committed acts "in the practice of medicine (Emphasis supplied)" which evidence moral unfitness to practice medicine. There is a distinction between a finding that an act "evidences moral unfitness" and a finding that a particular person is, in fact, morally unfit. In a proceeding before the State Board for Professional Medical Conduct, the Committee is asked to decide if certain conduct is consistent with moral unfitness. The Committee is not called upon to make an overall judgement regarding the moral character of any Respondent. The Committee was instructed that an otherwise moral individual can commit an act "evidencing moral unfitness" due to a lapse in judgement or other temporary aberration.

The standard for moral unfitness in the practice of medicine is twofold: First, there may be a finding that the accused has violated the public trust which is bestowed upon one by solely by virtue of his earning a license to practice medicine in this state. Physicians have privileges that are available to them solely due to the fact that one is a physician. Hence, it is expected that a physician will not violate the trust the public has bestowed upon him by virtue of his professional status. This leads to the second aspect of the standard: Moral unfitness can be seen as a violation of the moral standards of the medical community which the Committee, as delegated members of that community, represent.

In the case presented, the Committee has found that Respondent molested individuals A and B. Neither individual was or had ever been patients. Therefore, standing alone, the fact that Respondent molested individuals A and B, while detestable, does not fall within the parameters of the definition of moral unfitness under 6530(20). The physical acts committed did not occur "within the practice of medicine".

While the acts themselves may not fall within the legal definition of moral unfitness, the manner in which Respondent obtained the tools he used to molest these individuals was an unmitigated violation of the

standard. Respondent used Xanax, a controlled substance, to render these individuals helpless. The use of medication for other than medical purposes is a clear violation of the standards created by 6530 (20) of the

Education Law. Respondent used his medical authority<sup>2</sup> to obtain Xanax. But for his authority as a physician,

he would not have been able to obtain the drug. Hence, solely by virtue of his position as a physician, he

obtained drugs to make women helpless in order to molest them. It is not unreasonable to assume that

Respondent had access to controlled substances, at the hospital, solely for medical purposes. Therefore, by

absconding with the Xanax, for purposes of personal gratification is an egregious violation of Respondent's

authority as a physician. Respondent betrayed the trust bestowed upon him solely by virtue of his position

as a physician. The abuse of the privileges bestowed upon a person by virtue of his or her position as a

physician is not just detestable but, in this case, illegal.

With regard to the second definition of moral misconduct, the same acts which allowed Respondent to possess Xanax, also violate the moral standards of the medial community. The acts committed by Respondent are an abomination before the members of the medical community. While some matters may be subject to debate, medication theft for salacious purposes cannot be supported by any member of the medical community. Therefore, Respondent has violated both standards of moral unfitness.

Finally, the facts in Allegation C do not involve the practice of medicine. The intentional destruction of evidence, while completely unacceptable, cannot support a finding of immoral conduct, under the State's definition, because the State has not shown that the actions were made within the practice of medicine.

Therefore:

The First Specification is sustained based upon findings of fact 2, 3, and 4.

The Second Specification is sustained based upon findings of fact 2, 5 and 6.

The Third Specification is not sustained.

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<sup>&</sup>lt;sup>2</sup> Respondent was not a physician at the time of this incident. He was a Resident at St. Luke's- Roosevelt Hospital Center.(FOF 1) Under the program of study he was enrolled in, he had access to controlled substances and prescription books. Either privilege could be used to obtain the class IV controlled substances he used.

# FOURTH AND FIFTH SPECIFICATIONS (PRACTICING THE PROFESSION FRAUDULENTLY)

The fraudulent practice of medicine can be sustained when it is proven that Respondent made an intentional misrepresentation or concealment of a known fact, in connection with the practice of medicine. The fraudulent practice of medicine is present when:

- a.) In the practice of medicine, a false representation is made by Respondent, whether by words, conduct or concealment of that which should have been disclosed accurately;
- b.) Respondent knew the representation was false;
- c.) Respondent intended to mislead for personal gain through the false representation.

Where fraud is alleged, Respondent's knowledge and intent may properly be inferred from facts found by the hearing committee. However, the committee must specifically state the inferences and the basis for the inference.

The Committee finds Respondent has committed medical misconduct by engaging in fraudulent acts during the practice of medicine in violation of N.Y. Education Law §6530(2). In arriving at this conclusion, the Committee utilized an analysis consistent with the one stated above with regard to immoral practice. The State would have the Committee find that the molestation of the victims involved fraud. While this may in fact be accurate, any fraud used to deceive the victims so Respondent could make them helpless, was not committed within the practice of medicine. While molestation is absolutely unacceptable, Respondent cannot be found guilty of fraud based upon the definition of this term. This is because the victims were not, and had never been patients.

However, the manner in which Respondent obtained the drugs he used clearly constitutes fraud. Respondent was authorized to obtain drugs for medical use in the hospital. Obviously, he took Xanax for other than a medical use. This required him to make a false representation; that is he was taking the drugs for a medical use. Simple common sense instructs the Committee that Respondent intentionally took the drugs for salacious purposes and represented to his associates and mentors that the drugs were taken for

legitimate medical purposes. This misrepresentation is an offense that falls within the definition of medial

fraud as stated above.

Therefore:

The Fourth Specification is sustained based upon findings of fact 2, 3 and 4.

The Fifth Specification is sustained based upon findings of fact 2, 5 and 6.

SIXTH THROUGH EIGHTH SPECIFICATIONS
(Willful Failure to Follow Federal, State or Local Laws Governing the Practice of Medicine)

The Committee finds Respondent has committed medical misconduct by engaging in acts during the

practice of medicine which constituted willfully failing to follow state laws governing the practice of medicine

by violating N.Y. Public Health Law Article 33 in violation of New York Education Law §6530 (16).

The Committee takes notice that Article 33 of the Public Health Law restricts the use of controlled

substances in many ways. In particular, Article 33 requires that controlled substances be dispensed solely for

appropriate medical purposes. As was established above, Respondent dispensed Xanax for an other than a

medical purpose. Therefore, the Committee need not even consider if the purpose was appropriate. Of

course, the Committee finds that the purpose for using the drug was inappropriate.

The Eighth Specification refers to the alleged destruction of evidence. The Committee was not

supplied with a relevant law that Respondent violated. Therefore, this Specification cannot be sustained.

Therefore:

The Sixth Specification is **SUSTAINED** based upon findings of fact 2, 3 and 4.

The Seventh Specification is **SUSTAINED** based upon findings of fact 2, 5 and 6.

The Eighth Specification is **NOT SUSTAINED**.

NINTH AND TENTH SPECIFICATIONS

(Willfully, Harassing, Abusing, or Intimidating a Patient Either Physically or Verbally)

Respondent is charged with professional misconduct by willfully harassing and abusing (a patient)

physically in violation of New York Education Law §6530 (31). As has been pointed out earlier, neither

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individual A nor B was Respondent's patient. Therefore, Respondent never "practiced medicine" with either

person. Hence, a necessary element of the charge is absent and the Specifications cannot be sustained.

Therefore:

The Ninth Specification is **NOT SUSTAINED**.

The Tenth Specification is **NOT SUSTAINED**.

ELEVENTH AND TWELFTH SPECIFICATIONS
(Practicing the profession with gross negligence on a particular occasion)

Respondent is charged with professional misconduct by practicing the profession with gross

negligence on a particular occasion in violation of New York Education Law §6530 (4). As has been pointed

out earlier, neither individual A nor B was Respondent's patient. Therefore, Respondent never "practiced

medicine with either person. Hence, a necessary element of the charge is absent and the Specifications

cannot be sustained.

Therefore:

The ELEVENTH Specification is **NOT SUSTAINED**.

The TWELFTH Specification is **NOT SUSTAINED**.

THIRTEENTH AND FOURTEENTH SPECIFICATIONS
(Practicing the Profession with Negligence on More than One Occasion)

Respondent is charged with professional misconduct by practicing the profession with negligence on

more than one occasion in violation of New York Education Law §6530 (3). As has been pointed out earlier,

neither individual A nor B was Respondent's patient. Therefore, Respondent never "practiced medicine with

either person. Therefore, a necessary element of the charge is absent and the Specifications cannot be

sustained.

Therefore:

The THIRTEENTH Specification is **NOT SUSTAINED**.

The FOURTEENTH Specification is **NOT SUSTAINED**.

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FIFTEENTH AND SIXTEENTH SPECIFICATIONS

(Failing to Maintain a Record for Each Patient Which Accurately Reflects the Evaluation and

**Treatment of the Patient**)

Respondent is charged with professional misconduct by failing to maintain a record for each Patient

which accurately reflects the evaluation and treatment of the patient in violation of New York Education Law

§6530 (32). As has been pointed out earlier, neither individual A nor B was Respondent's patient. It follows

that, a necessary element of the charge is absent and the Specifications cannot be sustained.

Therefore:

The ELEVENTH Specification is **NOT SUSTAINED**.

The TWELFTH Specification is **NOT SUSTAINED**.

CONCLUSIONS **WITH REGARD** 

TO FINAL PENALTY

Respondent was given every reasonable opportunity to participate in this proceeding. It was

demonstrated that Respondent had knowledge of the charges against him. Nevertheless, Respondent has

chosen not to participate in the hearing. The very fact that Respondent has not made an appropriate

appearance before this Committee is significant in and of itself. Even if Respondent could not afford counsel

or is residing too far away to participate in New York, the Committee expects that a physician would have

participated in the proceeding to some extent.

The Trier of Fact is aware that Respondent has the right to remain silent during a proceeding.

Therefore, the silence of Respondent, in and of itself, cannot and does not form the basis for a finding of

culpability in this proceeding. Had Respondent made an actual appearance, he would nevertheless have been

free to remain mute. However, in this case Respondent has not chosen to remain silent, rather, he has

chosen to fail to appropriately respond to these proceedings. Sitting mute is a right. Failing to answer

questions is also a right. However, a failure to respond appropriately to an entire proceeding can have

significant consequences.

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The Trier of Fact finds that the acts proven are vile and repugnant. Based upon the legal definitions of some of the charges, it was impossible to sustain many of the specifications. Nevertheless, there were more than enough very serious Specifications to show that Respondent is not fit to practice medicine in this State. Respondent used the power granted him by the State of New York to fulfill his own salacious desires. The public must never be asked to tolerate such contemptible conduct. The Specifications proven leave but one penalty: Respondent must not be allowed to practice medicine in the State of New York.

The achievement of this goal is frustrated because Respondent was never issued a license to practice in this State. Respondent used the authority of a residency program to gain access to the drugs he used. Having never been issued a license, there is nothing for this Committee and the Board to revoke or suspend. Therefore, the Committee has elected to use the phrase "banned" from the practice of medicine in the Order. By using this term, it is hoped that Respondent will never again be granted any sort of authority to practice medicine in this State.

#### ORDER

WHEREFORE, Based upon the foregoing facts and conclusions,

It is hereby **ORDERED** that:

 The Factual allegations in the Statement of Charges (attached to this Decision and Order as Appendix One) are <u>SUSTAINED</u>;

Furthermore, it is hereby **ORDERED** that;

 The First through Eighth Specifications of Misconduct contained within the Statement of Charges (Appendix One) are <u>SUSTAINED</u>:

Furthermore, it is hereby **ORDERED** that;

The Eleventh through Sixteenth Specifications of Misconduct contained within the Statement of Charges (Appendix One) are **NOT SUSTAINED**;

Furthermore, it is hereby **ORDERED** that;

December 23, 2001

4. Respondent is <u>BANNED</u> <sup>3</sup> from the practice medicine in the State of New York;

Furthermore, it is hereby <u>ORDERED</u> that;

 This order shall take effect UPON RECEIPT or SEVEN (7) DAYS after mailing of this order by Certified Mail.

**DATED: Troy, New York** 

ARSENIO G. AGOPOVICH, M.D., Chairperson

SHELDON GAYLIN M.D.

MS. VIRGINIA R. MARTY

Respondent has never been issued a license to practice medicine in this State. He committed the acts proven while part of a residency program. Therefore, there is nothing to act upon by revocation, suspension etc. However, the term "banned" is intended to speak to future authorities. Should Respondent later make an effort to practice medicine in this State, via a residency program or some other manner, the State licensing authorities should not issue him any sort of permission to practice in New York State.

#### To:

### AMY B. MERKLEN, ESQ.

Associate Counsel Bureau of Professional Medical Conduct Empire State Plaza Corning Tower - Room 2509 Albany, New York 12237

## SALIM CAN ALKOC, M.D.

Sehit Muhtar Caddessi No.12 Kat 5 Taksim 80080 Istanbul, Turkey

### SALIM CAN ALKOC, M.D.

515 West 59<sup>th</sup> Street Apartment 18 H New York, NY 10019

### SALIM CAN ALKOC, M.D.

Fax Number: 011.90.212.291.0584

<sup>&</sup>lt;sup>4</sup>While facsimile is not a recognized method of service, the intention is to give Respondent notice of the disposition of this matter.

**APPENDIX ONE** 

EXHIBIT	
1	

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

.\_\_\_\_X

IN THE MATTER

NOTICE

OF

OF

SALIM CAN ALKOC, M.D.

: HEARING

\_\_\_\_\_X

TO: SALIM CAN ALKOC, M.D.
SEHIT MUHTAR CADDESSI NO. 12
KAT 5 TAKSIM 80080
ISTANBUL, TURKEY

PLEASE TAKE NOTICE:

A hearing will be held pursuant to the provisions of N.Y. Pub. Health Law Section 230 and N.Y. State Admin. Proc. Act Sections 301-307 and 401. The hearing will be conducted before a committee on professional conduct of the State Board for Professional Medical Conduct on the 28th day of August, 2001, at 10:00 in the forenoon at the Hedley Park Building, 433 River Street, Suite 303, Troy, New York, 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. 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 and examine evidence produced against you.

A summary of the Department of Health Hearing Rules is enclosed.

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 Bureau of Adjudication, Hedley Park Place, 5th Floor, 433 River Street, Troy, New York 12180, (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
Section 230(10)(c) you shall file a written answer to each of
the Charges and Allegations in the Statement of Charges no
later than ten days prior to the date of the hearing. Any
Charge and 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 Section 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.

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 THE OTHER SANCTIONS SET OUT IN

NEW YORK PUBLIC HEALTH LAW SECTION 230-a.

YOU ARE URGED TO OBTAIN AN ATTORNEY TO

REPRESENT YOU IN THIS MATTER.

DATED:

Albany, New York

June 21, 2001

PETER D. VAN BUREN
Deputy Counsel

Inquiries should be directed to:

Amy B. Merklen
Assistant Counsel
Division of Legal Affairs
Bureau of Professional
Medical Conduct
Corning Tower Building
Room 2509
Empire State Plaza

Albany, New York 12237-0032 (518) 486-1841

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

IN THE MATTER

: STATEMENT

OF

OF

SALIM C. ALKOC, M.D. : CHARGES

SALIM C. ALKOC, M.D., the Respondent, was authorized to practice medicine in New York as a Resident at St. Luke's -Roosevelt Hospital Center. The New York State Department of Education has not issued Respondent a license.

## FACTUAL ALLEGATIONS

- Respondent, on or about, May 23, 2000, at his Α. Manhattan, New York apartment, engaged in the following conduct:
  - Respondent obtained Alprazolam (a schedule IV controlled substance also identified as benzodiazipine alprazolam, other than for legitimate medical purposes.
  - Respondent administered Alprazolam to Patient A/Individual A without her knowledge or consent and for no legitimate medical purpose by means of an alcoholic beverage he served her.

- 3. After administering Alprazolam to Patient A/Individual A and after Patient A/Individual A was sedated and rendered helpless, Respondent performed sexual acts on Patient A/Individual A without her consent.
- B. Respondent, on or about May 23, 2000, at his Manhattan, New York, apartment and elsewhere, engaged in the following conduct:
  - Respondent administered Alprazolam to
     Patient B/Individual B without her
     knowledge or consent and for no legitimate
     medical purpose by means of an alcoholic
     beverage he served her.
  - 2. After administering Alprazolam to Patient B/Individual B in an alcoholic beverage and after Patient B/Individual B was sedated and rendered helpless, Respondent performed sexual acts on Patient B/Individual B without her consent.
- C. On or about June 8, 2000, Respondent instructed Mr. Turker Sengul to destroy evidence, consisting of video tapes, that would have been used in a professional misconduct proceeding, as well as, a criminal proceeding.

#### **SPECIFICATIONS**

#### FIRST THROUGH THIRD SPECIFICATIONS

# Conduct in the Practice of Medicine Which Evidences Moral Unfitness to Practice Medicine

Respondent is charged with professional misconduct by engaging in conduct during the practice of medicine which evidences moral unfitness to practice medicine in violation of New York Education Law §6530 (20) in that Petitioner charges:

- 1. The allegations in paragraphs A, A1, A2 and/or A3.
- The allegations in paragraphs A, B, B1, and/or
   B2.
- 3. The allegations in paragraph C.

#### FOURTH AND FIFTH SPECIFICATIONS

### Practicing the Profession Fraudulently

Respondent is charged with professional misconduct by reason of practicing the profession fraudulently in violation of N.Y. Education Law §6530(2)in that Petitioner charges:

- 4. The allegations in paragraphs A, A1, A2 and/or A3.
- 5. The allegations in paragraphs A, B, B1, and/or B2.

#### SIXTH THROUGH EIGHTH SPECIFICATIONS

Willful Failure to Follow Federal, State or Local Laws
Governing the Practice of Medicine

Respondent is charged with professional misconduct by willfully failing to follow state laws governing the practice of medicine by violating N.Y. Public Health Law Article 33 in violation of New York Education Law §6530 (16) in that Petitioner charges:

- 6. The allegations in paragraphs A, A1, A2 and/or A3.
- 7. The allegations in paragraphs A, B, B1 and/or B2.
- 8. The allegations in paragraph C.

# NINTH AND TENTH SPECIFICATIONS

# Willfully, Harassing, Abusing, or Intimidating a Patient Either Physically or Verbally

Respondent is charged with professional misconduct by willfully harassing and abusing a patient physically in violation of New York Education Law §6530 (31)in that Petitioner charges:

- 9. The allegations in paragraphs A, A1, A2 and/or A3.
- 10. The allegations in paragraphs A, B, B1 and/or B2.

# ELEVENTH AND TWELFTH SPECIFICATIONS

# Practicing the Profession with Gross Negligence on a Particular Occasion

Respondent is charged with professional misconduct by practicing the profession with gross negligence on a particular occasion in violation of New York Education Law

§6530 (4) in that Petitioner charges:

- 11. The allegations in paragraphs A, A1, A2 and/or A3.
- 12. The allegations in paragraphs A, B, B1, and/or B2.

# THIRTEENTH AND FOURTEENTH SPECIFICATIONS Practicing the Profession with Negligence on More than One Occasion

Respondent is charged with professional misconduct by practicing the profession with negligence on more than one occasion in violation of New York Education Law §6530 (3) in that Petitioner charges:

- 13. The allegations in paragraphs A, A1, A2 and/or A3.
- 14. The allegations in paragraphs A, B, B1, and/or B2.

## FIFTEENTH AND SIXTEENTH SPECIFICATIONS

# Failing to Maintain a Record for Each Patient Which Accurately Reflects the Evaluation and Treatment of the Patient

Respondent is charged with professional misconduct by failing to maintain a record for each Patient which accurately reflects the evaluation and treatment of the patient in violation of New York Education Law §6530 (32)in that Petitioner charges:

15. The allegations in paragraphs A, A1, A2 and/or

А3.

The allegations in paragraphs A, B, B1, and/or 16. B2.

DATED: June 21, 2001

Albany, New York

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

Medical Conduct