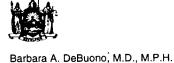
New York State Board for Professional Medical Conduct



Commissioner of Health

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

Patrick F. Carone, M.D., M.P.H.

Chair

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

Executive Secretary

August 1, 1997

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Craig B. Dumond, M.D. Old Farm Road Raybrook, New York 12977

RE:

License No. 134557

Dear Dr. Dumond:

Enclosed please find Order #BPMC 97-186 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect upon receipt of this letter or seven (7) days after the date of this letter, whichever is earlier.

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.

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.

and P. Male

Executive Secretary

Board for Professional Medical Conduct

Enclosure

cc:

Thomas F. Carrie, Esq. 5790 Widewaters Parkway Dewitt, New York 13214

Thomas K. O'Malley, Esq.

STATE OF NEW YORK : DEPARTMENT OF HEALTH

STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER : CONSENT

CRAIG B. DUMOND, M.D. : AND ORDER

: BPMC #97-186

: AGREEMENT

----X

OF

STATE OF NEW YORK)
ss:
COUNTY OF ESSEX)

CRAIG B. DUMOND, M.D., says:

On or about 1978, I was licensed to practice as a physician in the State of New York, having been issued license number 134557 by the New York State Education Department.

My current office address is Adirondack Surgical Group. RFD Box 410-B Sarenac Lake, New York 12983, my residence is Old Farm Road, Raybrook, New York 12977. 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 as set forth in the Statement of Charges, annexed hereto and made a part hereof Exhibit A.

I admit guilt to the Statement of Charges specification in full satisfaction of the charges against me.

I hereby agree to the penalty of Censure and Reprimand.

I agree that in the event that I am charged with professional misconduct in the future, this agreement and order

shall be admitted into evidence in that proceeding.

I agree that, as a condition of this Order, I will maintain current registration of my license with the New York State Education Department, Division of Professional Licensing Services, and pay all registration fees. This condition will remain in effect except during periods of actual suspension, if any, imposed by this Order. This condition shall be in effect beginning thirty days after the effective date of this Order and will continue until the full term of the Order has run, and until any associated period of probation and all probation terms have been completed and satisfied. I understand that any failure by me to comply with this condition shall constitute misconduct as defined by New York State Education Law §6530(29).

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

I understand that, in the event that the Board does not grant this application, 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, an order of the Chairperson of the Board shall be issued in

accordance with same.

I make this application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner.

CRAIG B, DUMOND, M.D.

RESPONDENT

Subscribed before me this

/// day of

, 1997.

NOTARY PUBLIC

MARTHA SALLS
NOTARY PUBLIC, STATE OF NEW YORK
NO 4995413
QUALIFIED IN ESSEX COUNTY
COMMISSION EXPIRES APRIL 20, 19

| AGREED | TO: | |
|--------|---------|---|
| DATE: | 7/16/97 | THOMAS CURRIE, ESQ. Attorney for Respondent |
| DATE: | 7/21/47 | THOMAS K. O'MALLEY ASSOCIATE COUNSEL Bureau of Professional Medical Conduct |
| DATE: | 7/23/97 | ANNE F. SAILE DIRECTOR Office of Professional Medical Conduct |

ORDER

Upon the proposed agreement of CRAIG P. DUMOND, M.D. for Consent Order, which proposed agreement is made a part hereof, it is AGREED TO and

ORDERED, that the proposed agreement and the provisions thereof are hereby adopted; 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.

DATED: July 28,1797

PATRICK F. CARONE, M.D., M.P.H.

Chair

State Board for Professional Medical Conduct

| | STATE OF NEW YORK : DEPARTMENT OF HEALTH |
|-----------|--|
| | STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT |
| | X |
| STATEMENT | IN THE MATTER : |
| OF | OF : |
| CHARGES | CRAIG B. DUMOND, M.D. : |
| | |

CRAIG B. DUMOND, M.D., the Respondent, was authorized to practice medicine in New York State on or about June 9, 1978, by the issuance of license number 134557 by the New York State Education Department. Respondent is currently registered with the New York State Education Department to practice medicine in New York State.

FACTUAL ALLEGATIONS

A. Between 1986 and 1996, Respondent was employed as an Orthopedic Surgeon at the Adirondack Medical Center, Lake Colby Drive, Saranac Lake, New York. While so employed, he failed to meet acceptable standards of medical care in the care and treatment of Patients A, B and C, in that Respondent failed to properly read and/or interpret the patients medical records and/or conditions which led to Respondent operating on the wrong patient anatomical area.

W YORK STATE DEPARTMENT OF HEALTH 4

SPECIFICATION OF MISCONDUCT

FIRST SPECIFICATION

GROSS NEGLIGENCE

Respondent is charged with gross negligence in violation of N.Y. Educ. Law §6530(4)(McKinney Supp. 1997) in that Petitioner charges the facts in Paragraph A.

DATED:

, 1997

Albany, New York

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