



Department of Health

ANDREW M. CUOMO
Governor

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

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

May 14, 2019

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

John J. Janick, M.D.


Re: License No. 113040

Dear Dr. Janick:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 19-116. This order and any penalty provided therein goes into effect May 21, 2019.

You are required to deliver your license and registration within 5 days of the effective date of the surrender provision to: c/o Physician Monitoring Unit, NYS DOH - OPMC, Riverview Center, Suite 355, 150 Broadway, Albany, NY 12204-2719.

If your license is framed, please remove it from the frame and only send the parchment paper on which your name is printed. Our office is unable to store framed licenses.

If the document(s) are lost, misplaced or destroyed, you are required to submit to this office an affidavit to that effect. Please complete and sign the affidavit before a notary public and return it to the Office of Professional Medical Conduct.

Please direct any questions to: NYS DOH - OPMC, Riverview Center, Suite 355, 150 Broadway, Albany, NY 12204-2719, telephone # (518) 402-0846.

Sincerely,



Robert A. Catalano, M.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Dale Sisco, Esq.
Sisco Law
1110 N. Florida Avenue
Tampa, Florida 33602

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

BPMC No. 19-116

IN THE MATTER
OF
JOHN J. JANICK, M.D.

SURRENDER
ORDER

Upon the application of (Respondent) John J. Janick, M.D. to surrender his license as a physician in the State of New York, which is made a part of this Surrender Order, it is

ORDERED, that the Surrender, and its terms, are adopted and it is further

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

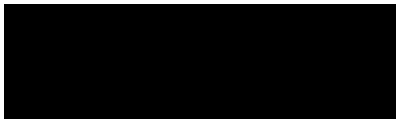
ORDERED, that this Order shall be effective upon issuance by the Board, either

- by mailing of a copy of this Surrender Order, either by first class mail to Respondent at the address in the attached Surrender of License application or by certified mail to Respondent's attorney, OR
- upon facsimile transmission to Respondent or Respondent's attorney,

Whichever is first,

SO ORDERED.

DATE: 05/10/2019



ARTHUR S. HENGERER, M.D.
Chair
State Board for Professional Medical Conduct

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

IN THE MATTER
OF
JOHN J. JANICK, M.D.

SURRENDER
OF
LICENSE
AND
ORDER

John J. Janick, M.D., represents that all of the following statements are true:

That on or about July 26, 1972, I was licensed to practice as a physician in the State of New York, and issued License No. 113040 by the New York State Education Department.

My current address is [REDACTED]

I understand that the New York State Board for Professional Medical Conduct (Board) has charged me with one or more specifications of professional misconduct, as set forth in a Statement of Charges, marked as Exhibit "A", which is attached to and part of this Surrender of License.

I am applying to the State Board for Professional Medical Conduct for permission to surrender my license as a physician in the State of New York on the grounds that I agree not to contest the allegations in full satisfaction of the charges against me.

I ask the Board to accept my Surrender of License, and I agree to be bound by all of the terms set forth in attached Exhibit "B".

I understand that, if the Board does not accept my Surrender of License, none of its terms shall bind me or constitute an admission of any of the acts of misconduct alleged; this application shall not be used against me in any way and shall be kept in strict

confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to the Public Health Law.

I agree that, if the Board accepts my Surrender of License, the Chair of the Board shall issue a Surrender Order in accordance with its terms. I agree that this Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Surrender Order by first class mail to me at the address in this Surrender of License, or to my attorney by certified mail, or upon facsimile transmission to me or my attorney, whichever is first. The Surrender Order, this agreement, and all attached exhibits shall be public documents, with only patient identities or other confidential information, if any, redacted. As public documents, they may be posted on the Department's website(s). OPMC shall report this action to the National Practitioner Data Bank, the Federation of State Medical Boards, and any other entities that the Director of OPMC shall deem appropriate.

I ask the Board to accept this Surrender of License, which I submit of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's acceptance of this Surrender of License, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the Surrender Order for which I apply, whether administratively or judicially, and I agree to be bound by the Surrender Order.

I understand and agree that the attorney for the Department, the Director of the Office of Professional Medical Conduct and the Chair of the State Board for Professional Medical Conduct each retain complete discretion either to enter into the proposed agreement and Order, based upon my application, or to decline to do so. I further

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understand and agree that no prior or separate written or oral communication can limit that discretion.

DATE Aug. 8, 19


JOHN J. JANICK, M.D.
RESPONDENT

The undersigned agree to Respondent's attached Surrender of License and Order and to its proposed penalty, terms and conditions.

DATE: 5/9/2019


DALE R. SISCO, ESQ.
Attorney for Respondent

DATE: 5/9/2019


PAUL TSUI
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 5/10/19


PAULA M. BREEN
Acting Director
Office of Professional Medical Conduct

EXHIBIT “A”

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

IN THE MATTER

OF

JOHN J. JANICK, M.D.

STATEMENT

OF

CHARGES

John J. Janick, M.D., the Respondent, was authorized to practice medicine in New York State on or about July 26, 1972, by the issuance of license number 113040 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about July 17, 2018, in the United States District Court, Middle District of Florida, Tampa Division, Respondent was found guilty, based upon a plea of guilt, of Obstruction of a Federal Audit in violation of 18 U.S.C. §1516, a Class E felony, and the conviction was completed upon being sentenced on or about September 11, 2018, to five months in prison, three years of supervised release, \$118,831.62 in restitution to Medicare, and a \$100.00 assessment.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

CRIMINAL CONVICTION (Federal)

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(9)(a)(ii) by having been convicted of committing an act constituting a crime under federal law as alleged in the facts of the following:

1. The facts in Paragraph A.

DATE: December 17, 2018
Albany, New York


TIMOTHY J. MAHAR
Acting Deputy Counsel
Bureau of Professional Medical Conduct