



Department of Health

KATHY HOCHUL
Governor

MARY T. BASSETT, M.D., M.P.H.
Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

November 15, 2022

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Nancy Sage, M.D.



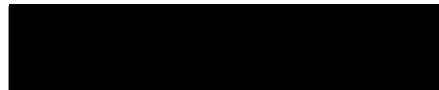
Re: License No. 290635

Dear Dr. Sage:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 22-236. This order and any penalty provided therein goes into effect November 22, 2022.

Please direct any questions to: Board for Professional Medical Conduct, Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204, telephone # 518-402-0846.

Sincerely,



Michael S. Jakubowski, M.D.
Interim Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Patrick J. Healey, Esq.
Rebar Kelly
424 Madison Avenue, Suite 1001
New York, New York 10017

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

IN THE MATTER
OF
NANCY SAGE, M.D.

BPMC No. 22-236

CONSENT
ORDER

Upon the application of (Respondent) Nancy Sage, M.D. in the attached Consent Agreement and Order, which is made a part of this Consent Order, it is

ORDERED, that the Consent Agreement, and its terms, are adopted and

it is further

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

either

by mailing of a copy of this Consent Order, either by first class mail to Respondent at the address in the attached Consent Agreement or by certified mail to Respondent's attorney, OR

upon facsimile transmission to Respondent or Respondent's attorney,

whichever is first.

SO ORDERED.

DATE: 11/11/2022


THOMAS T. LEE, M.D.
Chair
State Board for Professional Medical Conduct

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

IN THE MATTER
OF
NANCY SAGE, M.D.

CONSENT
AGREEMENT

Nancy Sage, M.D., represents that all of the following statements are true:

That on or about August 1, 2017, I was licensed to practice as a physician in the State of New York, and issued License No. 290635 by the New York State Education Department.

My current address is [REDACTED]

[REDACTED] and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

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", attached to and part of this Consent Agreement.

I agree not to contest the allegations, in full satisfaction of the charges against me, and agree to the following penalty:

Pursuant to New York Pub. Health Law § 230-a(2), my license to practice medicine in New York State shall be suspended for 36 months which shall be stayed.

Pursuant to New York Pub. Health Law § 230-a(9), I shall be placed on probation for 36 months, subject to the terms set forth in attached Exhibit "B."

I further agree that the Consent Order shall impose the following conditions:

That Respondent shall comply with each and every penalty imposed by this Order pursuant to N.Y. Pub. Health Law § 230-a.

Respondent, by making this application, asserts that Respondent does not currently practice medicine in New York State or in any setting or jurisdiction where that practice is predicated upon Respondent's New York State medical license ("New York Practice"). As a Condition of this Order, should Respondent decide to resume practicing medicine in New York, Respondent shall, before beginning such practice, provide 90 days advance written notice to the Director of OPMC. Respondent may not begin practicing medicine in New York until after Respondent receives the Director's written acknowledgment that this Condition has been satisfied,

and shall be subject to any further Conditions the Director may impose upon Respondent's New York Practice based on matters underlying this Consent Agreement and/or any circumstances or information known to the Director at the time of Respondent's proposed return to New York Practice.

Respondent, by making this Application, stipulates that the Director shall be authorized in the Director's sole discretion to impose whatever further Conditions the Director deems appropriate upon Respondent's return to practice in New York, and Respondent further stipulates that Respondent's failure to comply with these Conditions shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ Law § 6502 including but not limited to the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees. Respondent shall not exercise the option provided in N.Y. Educ. Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 120 days after the Consent Order's effective date and will continue so long as Respondent remains a licensee in New York State; and

That Respondent shall remain in continuous compliance with all requirements of N.Y. Pub. Health Law § 2995-a(4) and 10 NYCRR 1000.5,

including but not limited to the requirements that a licensee shall: report to the Department all information required by the Department to develop a public physician profile for the licensee; continue to notify the Department of any change in profile information within 30 days of any change (or in the case of optional information, within 365 days of such change); and, in addition to such periodic reports and notification of any changes, update the Licensee's profile information within six months prior to the expiration date of the licensee's registration period. Licensee shall submit changes to the Licensee's physician profile information either electronically using the Department's secure web site or on forms prescribed by the Department, and licensee shall attest to the truthfulness, completeness and correctness of any changes licensee submits to the Department. This condition shall take effect 30 days after the Order's effective date and shall continue so long as Respondent remains a licensee in New York State. Respondent's failure to comply with this condition, if proven and found at a hearing pursuant to N.Y. Pub. Health Law § 230, shall constitute professional misconduct as defined in N.Y. Educ. Law § 6530(21) and N.Y. Educ. Law § 6530(29). Potential penalties for failure to comply with this condition may include all penalties for professional misconduct set forth in N.Y. Pub. Health Law § 230-a, including but not limited to: revocation or suspension of license, Censure and Reprimand, probation, public service and/or fines of up to \$10,000 per specification of misconduct found; and

That Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204-2719, with the following information, in writing, and ensure that this information is kept current: a full description of Respondent's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information. This condition shall take effect 30 days after the Order's effective date and shall continue at all times until Respondent receives written notification from the Office of Professional Medical Conduct, Physician Monitoring Program, that OPMC has determined that Respondent has fully complied with and satisfied the requirements of the Order, regardless of tolling; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Consent Order and in its investigations of matters concerning Respondent. Respondent shall respond in a timely manner to all OPMC requests for written periodic verification of Respondent's compliance with this Consent Order.

Respondent shall meet with a person designated by the Director of OPMC,

as directed. Respondent shall respond promptly and provide all documents and information within Respondent's control, as directed. This condition shall take effect upon the Board's issuance of the Consent Order and will continue so long as Respondent remains licensed in New York State.

I stipulate that my failure to comply with any conditions of this Consent Order shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

I agree that, if I am charged with professional misconduct in future, this Consent Agreement and Order shall be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement 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 N.Y. Pub. Health Law.

I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that this Consent Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent Order by first class mail to me at the address in this Consent Agreement, or to my attorney by certified mail, OR upon facsimile transmission to me or my attorney, whichever is first.

The Consent 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. OPMC shall report this action to the National Practitioner Data Bank and the Federation of State Medical Boards, and any other entities that the Director of OPMC shall deem appropriate.

I stipulate that the proposed sanction and Consent Order are authorized by N.Y. Pub. Health Law §§ 230 and 230-a, and that the Board and OPMC have the requisite powers to carry out all included terms. I ask the Board to adopt this Consent Agreement of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's adoption of this Consent Agreement, 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 Consent Order for which I apply, whether administratively or judicially, I agree to be bound by the Consent Order, and I ask that the Board adopt this Consent Agreement.

I understand and agree that the attorney for the Department, the Director of OPMC and the Chair of the Board each retain complete discretion either to enter into the proposed agreement and Consent Order, based upon my application, or to decline to do so. I further understand and agree that no prior or separate written or oral communication can limit that discretion.

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DATE 11/3/2022


NANCY SAGE, M.D.
RESPONDENT

The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions.

DATE: 11/3/2022


PATRICK J. HEALEY, ESQ.
Attorney for Respondent

DATE: 11/8/22


PAUL T. SUI
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 11-10-2022


SHELLY WANG BANDAGO
Director
Office of Professional Medical Conduct

Exhibit A

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

IN THE MATTER

OF

NANCY SAGE, M.D.

STATEMENT

OF

CHARGES

Nancy Sage, M.D., the Respondent, was authorized to practice medicine in New York State on or about August 1, 2017, by the issuance of license number 290635 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. Respondent provided medical care to Patient A (patients are identified in attached Appendix A), an 89 year-old female patient at the time of treatment at Our Lady of Lourdes Memorial Hospital, 169 Riverside Drive Binghamton, New York, on or about May 23, 2018 and May 24, 2018. Patient A had been admitted on May 22, 2018, following a fall and diagnosed with anemia and pneumonia, among other conditions. Respondent's medical care of Patient A deviated from accepted standards of care as follows:

1. Respondent failed to adequately evaluate and/or treat Patient A's anemia.
2. Respondent failed to consult with and/or document consultations with other treating physicians.
3. Respondent failed to obtain the results of fecal occult blood test and/or failed to document the reason for canceling the study prior to receiving the results.

4. Respondent failed to adequately review the results of an iron panel and/or failed to document the review of the results of the iron panel.
5. Respondent failed to adequately evaluate and/or document an evaluation of Patient A's decreasing hemoglobin and hematocrit levels.
6. Respondent failed to adequately evaluate and/or document an evaluation of Patient A's elevated BUN and creatinine levels.
7. Respondent failed to discuss with Patient A and/or document a discussion with Patient A, a plan to treat her anemia, thrombocytopenia, and elevated BUN.
8. Respondent failed to consult with and/or document a consultation with Patient A's nephrologist.
9. Respondent inappropriately continued Patient A on Coumadin despite a decrease in hemoglobin and hematocrit and an elevated BUN.
10. Respondent inappropriately ordered IV venofer treatment despite a normal ferritin level and/or failed to document Respondent's reasoning for ordering the IV venofer treatment.
11. Respondent failed to appropriately prescribe antibiotics for the treatment of Patient A's UTI and pneumonia.
12. Respondent failed to order abdominal and pelvic CT imaging.
13. Respondent failed to obtain a gastroenterology consult.
14. Respondent failed to appropriately document her medical decision making with respect to discharging Patient A.

15. Respondent failed to maintain a record that accurately reflected the evaluation and treatment of Patient A.

B. Respondent provided medical care to Patient B, a 78 year-old female patient at the time of treatment at Our Lady of Lourdes Memorial Hospital, 169 Riverside Drive, Binghamton, New York, on or about May 20, 2018. Patient B presented approximately six hours earlier with a complaint of left sided back pain radiating to the abdomen and constipation. Respondent's medical care of Patient B deviated from accepted standards of care as follows:

1. Respondent failed to adequately examine and/or document an examination of Patient B at the time of discharge within six hours of Patient B being admitted.
2. Respondent failed to consult with and/or document a consultation with other treating physicians.
3. Respondent failed to adequately evaluate a suprarenal AAA that appeared new and hypoxemia and/or failed to document an evaluation of suprarenal AAA and hypoxemia.
4. Respondent ordered a chest x-ray but failed to review the results and/or failed to document the results of the x-ray.
5. Respondent failed to discuss with Patient B and/or failed to document any discussion with Patient B about treatment for the suprarenal AAA.
6. Respondent failed to adequately evaluate Patient B's cachexia and constipation and/or failed to document an evaluation of the cachexia and constipation.

7. Respondent failed to adequately evaluate Patient B's COPD and/or document an evaluation.
8. Respondent failed to adequately evaluate Patient B's oxygen saturation on exertion and/or failed to document Patient B's oxygen saturation on exertion.
9. Respondent failed to document any progress notes during Patient B's treatment.
10. Respondent failed to adequately assess Patient B's respiratory status and clinical condition at the time of discharge and/or failed to document Patient B's respiratory status and clinical condition at the time of discharge.
11. Respondent failed to adequately document her medical decision-making with respect to discharging Patient B including discharge notes and/or a discharge summary.
12. Respondent failed to maintain a record that accurately reflected the evaluation and treatment of Patient B.

C. Respondent provided medical care to Patient C, an 80 year-old female patient at the time of treatment at Our Lady of Lourdes Memorial Hospital, 169 Riverside Drive, Binghamton, New York, on or about May 22, 2018, the day of Patient C's discharge. Patient C had presented on or about May 20, 2018, with a complaint of cough, chest congestion, and shortness of breath. Respondent's medical care of Patient C deviated from accepted standards of care as follows:

1. Respondent failed to adequately evaluate and/or document a thorough evaluation of Patient C at the time of discharge.

2. Respondent failed to consult with and/or document any consultation with other treating physicians.
3. Respondent failed to document a discharge summary for Patient C.
4. Respondent failed to document any progress notes.
5. Respondent failed to review a T4 study for hyperthyroidism and/or failed to document a review and results of the study.
6. Respondent failed to review a urine culture that was positive for Group B strep and/or failed to document a review of the urine culture.
7. Respondent failed to review a swallow evaluation and/or failed to document a review of the swallow evaluation.
8. Failed to adequately evaluate Patient C's leukocytosis and bacteremia, elevated creatinine, and hypoxemia and/or failed to document an evaluation.
9. Respondent failed to discuss with Patient C and/or Patient C's primary care physician abnormal test results and/or failed to document any discussion with Patient C and/or Patient C's primary care physician.
10. Respondent failed to maintain a record that accurately reflected the evaluation and treatment of Patient C.

D. Respondent provided medical care to Patient D, a 30 year-old male patient at the time of treatment at Our Lady of Lourdes Memorial Hospital, 169 Riverside Drive, Binghamton, New York, on or about May 21, 2018, and May 22, 2018. Patient D had presented on or about May 19, 2018, following an accidental overdose of prednisone.

Respondent's medical care of Patient D deviated from accepted standards of care as follows:

1. Respondent failed to repeat a lab test value for phosphorous prior to discharging Patient D and/or failed to document a repeat lab value.
2. Respondent failed to consult with and/or document any consultation with other treating physicians.
3. Respondent failed to adequately evaluate and manage hypophosphatemia in Patient D and/or failed to document such an evaluation
4. Respondent failed to maintain a record that accurately reflected the evaluation and treatment of Patient D.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(3) by practicing the profession of medicine with negligence on more than one occasion, in that Petitioner charges two or more of:

1. The facts in Paragraphs A and A1, A and A2, A and A3, A and A4, A and A5, A and A6, A and A7, A and A8, A and A9, A and A10, A and A11, A and A12, A and A13, A and A14, A and A15, B and B1, B and B2, B and B3, B and B4, B

and B5, B and B6, B and B7, B and B8, B and B9, B and B10, B and B11, B and B12, C and C1, C and C2, C and C3, C and C4, C and C5, C and C6, C and C7, C and C8, C and C9, C and C10, D and D1, D and D2, D and D3, and/or D and D4.

SECOND SPECIFICATION

FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(32) by failing to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient, in that Petitioner charges:

2. The facts in Paragraphs A and A2, A and A3, A and A4, A and A5, A and A6, A and A7, A and A8, A and A10, A and A14, A and A15, B and B1, B and B2, B and B3, B and B4, B and B5, B and B6, B and B7, B and B8, B and B9, B and B10, B and B11, B and B12, C and C1, C and C2, C and C3, C and C4, C and C5, C and C6, C and C7, C and C8, C and C9, C and C10, D and D1, D and D2, D and D3, and/or D and D4.

DATE: November 8, 2022
Albany, New York


JEFFREY J. CONKLIN
Deputy Director
Bureau of Professional Medical Conduct

EXHIBIT "B"

Terms of Probation

- 1) Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by N.Y. Educ. Law §§ 6530 or 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to N.Y. Pub. Health Law § 230(19).
- 2) Respondent shall cooperate fully with, and respond in a timely manner to, OPMC requests to provide written periodic verification of Respondent's compliance with the terms of this Consent Order. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
- 3) Respondent's failure to pay any monetary penalty by the prescribed date shall subject Respondent to all provisions of law relating to debt collection by New York State, including but not limited 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].
- 4) The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 30 consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in, or intends to leave, active medical practice in New York State for a consecutive 30 day period. Respondent shall then notify the Director again at least 14 days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period shall resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in Exhibit "A" or as are necessary to protect the public health.
- 5) The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
- 6) Respondent shall adhere to federal and state guidelines and professional standards of care with respect to infection control practices. Respondent shall ensure education, training and oversight of all office personnel involved in medical care, with respect to these practices.

- 7) Respondent shall maintain complete and legible medical records that accurately reflect the evaluation and treatment of patients and contain all information required by State rules and regulations concerning controlled substances.
- 8) No more than 30 days after the Consent Order's effective date, Respondent shall practice medicine only when monitored by a licensed physician, board-certified in an appropriate specialty, ("practice monitor") proposed by Respondent and subject to the Director of OPMC's written approval. No more than 30 days after learning that the approved practice monitor is no longer willing or able to serve or no more than 30 days after having been notified by the Director that the practice monitor has been discharged for cause, which shall include but not be limited to the inadequacy of the practice monitor's reports and/or performance, Respondent shall have an approved successor in place, subject to the Director's written approval. Upon approval, the new practice monitor shall perform the duties described in (a) and (c) below. Regardless of the reason necessitating a replacement, if the Director does not approve Respondent's proposed new practice monitor, Respondent shall immediately cease the practice of medicine, unless notified by the Director, in writing, of an extension, which may be granted at the Director's discretion. In that event, Respondent shall propose another practice monitor, which the Director has 30 days to approve or disapprove until a practice monitor is accepted. Any medical practice in violation of this term shall constitute the unauthorized practice of medicine.
 - a) Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, on a random unannounced basis at least monthly and shall examine a selection (no fewer than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.
 - b) Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
 - c) Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.
 - d) Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law.

Proof of coverage shall be submitted to the Director of OPMC prior to Respondent's practice after the effective date of this Order.

- 9) Respondent shall enroll in and successfully complete continuing education as directed by the Office of Professional Medical Conduct, subject to the Director of OPMC's prior written approval.
- 10) Respondent shall comply with this Consent Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a violation of, these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.