

**These charges are only allegations
which may be contested by the licensee
in an administrative hearing.**

IN THE MATTER

OF

FERDOUS KHANDKER, M.D.

STATEMENT
OF
CHARGES

FERDOUS KHANDKER, M.D., the Respondent, was authorized to practice medicine in New York State on or about June 21, 2002, by the issuance of license number 225253 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. Respondent, an Internal Medicine physician, treated female Patient A as her primary care physician, from on or about January 13, 2016, when she was 19 years old, through on or about February 5, 2020. Respondent, Patient A and Patient A's mother, also Respondent's patient, were born in Bangladesh, India and lived within that cultural community in Jackson Heights, Queens, New York. Respondent has a private office at 70-17 37th Avenue in Jackson Heights.

Respondent deviated from accepted medical standards in that he:

1. Failed to appropriately and/or accurately perform and/or document medical histories and examinations for Patient A initially and at subsequent visits.
2. Documented diagnostic codes for Patient A that were unsupported in the record.
3. Failed to appropriately follow-up on Patient A's medical condition(s) while continuing to document complete and unchanged Review of Systems and Physical Examinations at subsequent visits.

4. Documented counseling Patient A on multiple issues in his Assessment and Plan for treatment inconsistent with Patient A's complaints, age, history and medical status.
5. On or about February 5, 2020, Patient A saw Respondent for a physical examination. Patient A made no complaints about her breasts nor did Respondent document any breast examination on that day. Without Patient A's consent, Respondent pulled up her T shirt, exposed her breasts and grabbed her nipples for no legitimate medical purpose. This was the last time Patient A visited Respondent.
6. Failed to maintain a record that adequately and accurately reflects the evaluation and treatment of Patient A.

B. Respondent treated female Patient B as her primary care physician, from on or about August 12, 2007, when she was 19 years old, through on or about March 27, 2009. Respondent, Patient B and her parents, also Respondent's patients, were born in Bangladesh, India and lived within that cultural community in Jackson Heights, Queens, New York. Respondent deviated from accepted medical standards in that he:

1. Failed to appropriately and/or accurately perform and/or document medical histories and examinations for Patient B initially and at subsequent visits.
2. Failed to appropriately follow-up on Patient B's medical condition(s) while continuing to document complete and unchanged Review of Systems and Physical Examinations at subsequent visits.
3. On or about March 27, 2009, Patient B visited Respondent for chest pain after working out at the gym. Patient B made no complaints about her breasts nor did Respondent document any breast examination on that day. Respondent asked Patient B to lower her shirt as he examined her with his stethoscope. Without Patient B's consent, Respondent pressed his stethoscope toward, then on, her nipples for no legitimate medical purpose. This was the last time Patient B visited Respondent.
4. Failed to maintain a record that adequately and accurately reflects the

evaluation and treatment of Patient B.

C. Respondent treated female Patient C as her primary care physician, from on or about October 23, 2018, when she was 20 years old, through on or about September 21, 2019. Respondent, Patient C and other family members, also Respondent's patients, were born in Bangladesh, India and lived within that cultural community in Jackson Heights, Queens, New York. Respondent deviated from accepted medical standards in that he:

1. Failed to appropriately and/or accurately perform and/or document medical histories and examinations for Patient C initially and at subsequent visits.
2. Failed to appropriately follow-up on Patient C's medical condition(s) while continuing to document complete and unchanged Review of Systems and Physical Examinations for Patient C at subsequent visits.
3. Documented counseling Patient C on multiple issues in his Assessment and Plan for treatment inconsistent with Patient C's complaints, age, history and medical status.
4. On or about October 23, 2018, Patient C saw Respondent for a referral to an OB/GYN to follow-up on a previously diagnosed and tested lump in her left breast in Bangladesh 5 months prior, although Respondent documented the reason for the visit was a physical examination. Without Patient A's permission, Respondent examined her breast resulting in Patient C pulling away from him. Respondent did not document any breast examination on Patient C that day.
5. Sometime in 2019, Patient C saw Respondent for a physical accompanied by her mother. While blocking her mother's view Respondent held Patient C's arms down on her knees and brushed against her breast.
6. Failed to maintain a record that adequately and accurately reflects the evaluation and treatment of Patient C.

D. Respondent treated 14 year-old female Patient D on or about September 24, 2011, when her mother, also Respondent's patient, brought her to him for her

daughter's complaint of headache with sinus pressure, fever and congestion. Respondent, Patient D and other mother were born in Bangladesh, India and lived within that cultural community in Jackson Heights, Queens, New York. Respondent deviated from accepted medical standards in that he:

1. Blocked Patient D's mother's view while using his stethoscope to examine Patient D and rubbed it around her nipple.
2. Failed to maintain a record that adequately and accurately reflects the evaluation and treatment of Patient D.

SPECIFICATION OF CHARGES

FIRST THROUGH FOURTH SPECIFICATIONS

WILLFULLY HARASSING, ABUSING, OR INTIMIDATING A PATIENT

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(31) by willfully harassing, abusing, or intimidating a patient either physically or verbally as alleged in the facts of:

1. Paragraph A and subparagraph A(5).
2. Paragraph B and subparagraph B(3).
3. Paragraph C and subparagraph C(4) and C(5).
4. Paragraph D and subparagraph D(1).

FIFTH THROUGH SEVENTH SPECIFICATIONS

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 as alleged in the facts of:

5. Paragraph A and each of its subparagraphs except A(6).

6. Paragraph B and each of its subparagraphs except B(4).
7. Paragraph C and each of its subparagraphs except C(6).

EIGHTH THROUGH ELEVENTH SPECIFICATIONS

GROSS NEGLIGENCE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(4) by practicing the profession of medicine with gross negligence on a particular occasion as alleged in the facts of the following:

8. Paragraph A and subparagraph A(5).
9. Paragraph B and subparagraph B(3).
10. Paragraph C and subparagraph C(4) and C(5).
11. Paragraph D and subparagraph D(1).

TWELFTH THROUGH FIFTEENTH SPECIFICATIONS

MORAL UNFITNESS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(20) by engaging in conduct in the practice of the profession of medicine that evidences moral unfitness to practice as alleged in the facts of the following:

12. Paragraph A and subparagraph A(5).
13. Paragraph B and subparagraph B(3).
14. Paragraph C and subparagraph C(4) and C(5).
15. Paragraph D and subparagraph D(1).

SIXTEENTH THROUGH NINETEENTH SPECIFICATIONS

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, as alleged in the facts of:

16. Paragraph A and subparagraph A(5).
17. Paragraph B and subparagraph B(4).
18. Paragraph C and subparagraph C(6).
19. Paragraph D and subparagraph D(2).

DATE: September 28, 2023
New York, New York

Henry Weintraub
Chief Counsel
Bureau of Professional Medical Conduct