



## Department of Health

KATHY HOCHUL  
Governor

JAMES V. McDONALD, M.D., M.P.H.  
Commissioner

JOHANNE E. MORNE, M.S.  
Acting Executive Deputy Commissioner

November 30, 2023

**CERTIFIED MAIL - RETURN RECEIPT REQUESTED**

Warren Purvis, M.D.



Deborah Beth Medows, Esq.  
New York State Department of Health  
Bureau of Professional Medical Conduct  
90 Church Street, 4th Floor  
New York, New York 10007

**RE: In the Matter of Warren Leslie Purvis, M.D.**

Dear Parties:

Enclosed please find the Determination and Order (No. 23-246) 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), (McKinney Supp. 2015) and §230-c subdivisions 1 through 5, (McKinney Supp. 2015), "the determination of a committee on professional medical conduct may be reviewed by the Administrative Review Board for professional medical conduct." Either the Respondent 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:

Jean T. Carney, Administrative Law Judge  
New York State Department of Health  
Bureau of Adjudication  
Riverview Center  
150 Broadway – Suite 510  
Albany, New York 12204

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 Judge Carney 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,

A solid black rectangular redaction box covering the signature of the sender.

Natalie J. Bordeaux  
Chief Administrative Law Judge  
Bureau of Adjudication

NJB:nm  
Enclosure

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

COPY

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IN THE MATTER :  
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OF :  
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WARREN LESLIE PURVIS, M.D. :  
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DETERMINATION  
AND  
ORDER

BPMC-23-246

A Notice of Referral Proceeding and Statement of Charges dated October 23, 2023, were duly served upon Warren Leslie Purvis, M.D. (Respondent) pursuant to Public Health Law (PHL) § 230(10)(d)(i). (Exhibits 1, 2.) A hearing was held on November 29, 2023, via WebEx videoconference. Pursuant to PHL § 230(10)(e), **CASSANDRA E. HENDERSON, M.D., M.Sc., CDCES**, Chairperson, **PROSPERE REMY, M.D.**, and **MYRA M. NATHAN, Ph.D.**, duly designated members of the State Board for Professional Medical Conduct, served as the Hearing Committee. **NATALIE BORDEAUX** served as the administrative officer.

The Department appeared by Deborah Beth Medows, Esq. The Respondent appeared and represented himself. The Hearing Committee received and examined documents from the Department (Exhibits 1-3). A transcript of the proceeding was made. After consideration of the entire hearing record, the Hearing Committee hereby issues this Determination and Order, sustaining the charge but imposing no penalty. All findings, conclusions, and determinations are unanimous.

**BACKGROUND**

The Department brought the case pursuant to PHL § 230(10)(p), which provides for a hearing when a licensee is charged solely with a violation of Education Law § 6530(9). The Respondent is charged with professional misconduct pursuant to Education Law § 6530(9)(d), having disciplinary action taken against his medical license in Rhode Island after a disciplinary action was instituted by

a duly authorized professional agency of that state, where the conduct resulting in the disciplinary action would, if committed in New York state, constitute professional misconduct under the laws of New York. Under PHL § 230(10), the Department had the burden of proving its case by a preponderance of the evidence.

#### FINDINGS OF FACT

1. The Respondent was authorized to practice medicine in New York on January 4, 1980, under license number 140976. (Exhibit 2.)
2. Effective January 22, 2022, a Consent Order between the Respondent and the Board of Medical Licensure and Discipline of the Rhode Island Department of Health (Rhode Island Board) was ratified, in which the Respondent agreed that he violated Rhode Island General Laws § 5-37-5.1(19), incompetent, negligent or willful misconduct in the practice of medicine, which includes the rendering of medically unnecessary services, and any departure from, or the failure to conform to, the minimal standards of acceptable and prevailing medical practice in his area of expertise. Pursuant to the Consent Order, the Rhode Island Board issued a reprimand on the Respondent's Rhode Island physician license, an administrative fine of \$1100, and completion of a Prescribing Controlled Substances course given by the Center for Personalized Education for Professionals (CPEP). (Exhibit 3.)

#### DISCUSSION

The Respondent entered into a Consent Order with the Rhode Island Board to resolve charges that, over the course of a 15-year physician-patient relationship with Patient A, the Respondent had prescribed stimulants and Schedule II controlled substances for a prolonged period of time without ever requiring the patient to submit to urine drug screens, despite the patient's frequent marijuana use, alleged cocaine use, and behavioral episodes that should have prompted

other interventions and follow up. In addition, the Rhode Island Board determined that the Respondent's medical records for this patient only rarely identified the patient's medications and did not document what target symptoms were being addressed, whether they improved or worsened, or whether the patient was complying with a treatment plan. (Exhibit 3.)

The Hearing Committee agreed that the Respondent's conduct resulting in the Rhode Island Board's disciplinary action would, if committed in New York, constitute misconduct pursuant to Education Law § 6530(3), practicing the profession with negligence on more than one occasion; and Education Law § 6530(32), failing to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient. The Hearing Committee thus determined that the Respondent violated Education Law § 6530(9)(d).

After determining to sustain the charge, the Hearing Committee considered all possible penalties authorized by PHL § 230-a. The Department recommended the revocation of the Respondent's medical license, a penalty with which the Hearing Committee disagreed. The Hearing Committee found the Respondent remorseful and his professional record impressive. The Respondent is a psychiatrist who is in the process of retiring. The Respondent testified that he has complied with the terms of the Consent Order and has no restrictions on his ability to practice medicine in Rhode Island. He explained that he altered his recordkeeping practices after the Rhode Island disciplinary action. The Respondent conceded that he had not always inserted a patient's date of birth on individual progress notes before but has now made the inclusion of a patient's date of birth on all records his standard practice. Although he acknowledged that he had not previously inserted medication lists in patient records, he stated that he had always queried the Physician Monitoring Program (PMP) database before prescribing controlled substances to patients. The Respondent now includes medication lists in patient records.

The Hearing Committee found no basis for imposing further penalties for issues already addressed in Rhode Island, the state in which the alleged deficiencies occurred. The Respondent has accepted responsibility for his actions and poses no risk to patient safety. For these reasons, the Hearing Committee declined to impose a penalty.


**ORDER**

**IT IS HEREBY ORDERED THAT:**


1. The charge of professional misconduct, as set forth in the Statement of Charges, is sustained.
2. No penalty is imposed.
3. This Order shall be effective upon service on the Respondent in accordance with the requirements of PHL § 230(10)(h).

**DATED:** 11.30.23, 2023

                    , New York

  
**Cassandra E. Henderson, M.D., M.Sc., CDCES,  
Chairperson  
Prosper Remy, M.D.  
Myra M. Nathan, Ph.D.**

To: Warren Purvis, M.D.

  
Deborah Beth Medows, Esq.  
New York State Department of Health  
Bureau of Professional Medical Conduct  
90 Church Street, 4<sup>th</sup> Floor  
New York, New York 10007

**IN THE MATTER**  
**OF**  
**WARREN LESLIE PURVIS M.D.**

**STATEMENT**  
**OF**  
**CHARGES**

Warren Leslie Purvis, M.D., the Respondent, was authorized to practice medicine in New York State on or about January 4, 1980, by the issuance of license number 140976 by the New York State Education Department.

**FACTUAL ALLEGATIONS**

- A. On or about January 12, 2022, the Rhode Island Board of Medical Licensure and Discipline (hereinafter "the Rhode Island Board") issued a Consent Order, which reprimanded Respondent; imposed an \$1100 administrative fee; placed Respondent on probation for one year; and required Respondent to complete a course in prescribing controlled substances within six months of ratification of the Consent Order. The Board found that, for one patient, Respondent's "documentation was deficient in many respects and therefore the standard of care was not met on others bases as well." During 15 years of medical care for this patient, Respondent never required the patient to submit to drug screens despite concerns about marijuana and cocaine use; Respondent's progress notes did not include evidence of medication reconciliation; Respondent's

medical record did not contain documentation of what target symptoms were being addressed, whether they were improved or worse, or whether the patient was adherent to the treatment plan; Respondent did not document whether he performed any assessment to determine whether the patient was diverting the medications prescribed; Respondent's progress notes were ambiguous; and Respondent failed to consider whether the patient was professionally impaired.

1. The conduct resulting in the Rhode Island Consent would constitute misconduct under the laws of New York State, pursuant to the following sections of New York State Law:
  - a. N.Y. Education Law § 6530 (3) (Practicing the profession with negligence on more than one occasion) and

- b. N.Y. Education Law § 6530 (32) (Failing to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient), as alleged in the facts of:

- i. Paragraph A.

### **SPECIFICATION OF CHARGES**

#### **HAVING A DISCIPLINARY ACTION TAKEN**


Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(9)(d) by having his or her license to practice medicine revoked, suspended or having other disciplinary action taken, or having his or her application for a license refused, revoked or suspended or having voluntarily or otherwise surrendered his or her license after a disciplinary action was instituted by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the



revocation, suspension or other disciplinary action involving the license or refusal, revocation or suspension of an application for a license or the surrender of the license would, if committed in New York state, constitute professional misconduct under the laws of New York state, namely N.Y. Educ. Law §§ 6530 (3) and (32) as alleged in the facts of the following:

1. The facts in Paragraph A.

DATE: October 23, 2023  
New York, New York

  
Henry Weintraub  
Chief Counsel  
Bureau of Professional Medical Conduct