



STATE OF NEW YORK DEPARTMENT OF HEALTH

433 River Street, Suite 303

Troy, New York 12180-2299

Barbara A. DeBuono, M.D., M.P.H.
Commissioner

Dennis P. Whalen
Executive Deputy Commissioner

November 14, 1997

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Syed Ikramuddin, M.D.
5251 Highway US 23 North
Prestonburg, Kentucky 41653

Gleason, Dunn, Walsh & O'Shea
Thomas F. Gleason, Esq., of Counsel
102 Hackett Boulevard
Albany, New York 12209

William J. Lynch, Esq.
NYS Department of Health
Corning Tower Room 2412
Empire State Plaza
Albany, New York 12237

RE: In the Matter of Syed Ikramuddin, M.D.

Dear Parties:

Enclosed please find the Determination and Order (No. 97-280) 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.

Five days after receipt of this Order, you will be required to deliver to the Board of Professional Medical Conduct your license to practice medicine if said license has been revoked, annulled, suspended or surrendered, together with the registration certificate. Delivery shall be by either **certified mail or in person** to:

Office of Professional Medical Conduct
New York State Department of Health
Hedley Park Place
433 River Street - Fourth Floor
Troy, New York 12180

If your license or registration certificate is lost, misplaced or its whereabouts is otherwise unknown, you shall submit an affidavit to that effect. If subsequently you locate the requested items, they must then be delivered to the Office of Professional Medical Conduct in the manner noted above.

As prescribed by the New York State Public Health Law §230, subdivision 10, paragraph (i), and §230-c subdivisions 1 through 5, (McKinney Supp. 1992), "the determination of a committee on professional medical conduct may be reviewed by the Administrative Review Board for professional medical conduct." Either the licensee or the Department may seek a review of a committee determination.

Request for review of the Committee's determination by the Administrative Review Board stays penalties **other than suspension or revocation** until final determination by that Board. Summary orders are not stayed by Administrative Review Board reviews.

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.

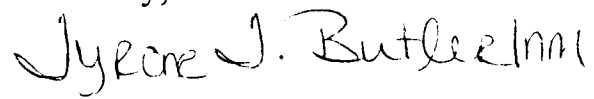
The notice of review served on the Administrative Review Board should be forwarded to:

James F. Horan, Esq., Administrative Law Judge
New York State Department of Health
Bureau of Adjudication
Hedley Park Place
433 River Street, Fifth Floor
Troy, New York 12180

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 Mr. Horan 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 handwritten signature in black ink that reads "Tyrone T. Butler nm". The signature is written in a cursive, flowing style.

Tyrone T. Butler, Director
Bureau of Adjudication

TTB:nm
Enclosure

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

COPY

**IN THE MATTER
OF
SYED IKRAMUDDIN, M.D.**

**DETERMINATION
AND
ORDER
BPMC - 97 - 280**

**JOSEPH G. CHANATRY, M.D., (Chair), TERESA S. BRIGGS, M.D. and
NANCY J. MACINTYRE, R.N., Ph.D.,** duly designated members of the State Board for Professional Medical Conduct, served as the Hearing Committee in this matter pursuant to § 230(10) of the Public Health Law.

MARC P. ZYLBERBERG, ESQ., ADMINISTRATIVE LAW JUDGE, served as the Administrative Officer.

The Department of Health appeared by **WILLIAM J. LYNCH, ESQ.,** Senior Attorney.

Respondent, **SYED IKRAMUDDIN, M.D.,** appeared personally and was represented by **GLEASON, DUNN, WALSH & O'SHEA, THOMAS F. GLEASON, ESQ.,** of counsel.

A Hearing was held on October 15, 1997. Evidence was received and examined, including witnesses who were sworn or affirmed (two witnesses were heard via telephone). A transcript of the proceeding was made. After consideration of the record, the Hearing Committee issues this Determination and Order, pursuant to the Public Health Law and the Education Law of the State of New York.

STATEMENT OF CASE

The State Board for Professional Medical Conduct is a duly authorized professional disciplinary agency of the State of New York (§ 230 et seq. of the Public Health Law of the State of New York [**"P.H.L."**]).

This case, brought pursuant to P.H.L. § 230(10)(p), is also referred to as an "expedited hearing". The scope of an expedited hearing is strictly limited to evidence or sworn testimony relating to the nature and severity of the penalty (if any) to be imposed on the licensee¹ (Respondent).

SYED IKRAMUDDIN, M.D., (**"Respondent"**) is charged with professional misconduct within the meaning of § 6530(9)(b) of the Education Law of the State of New York (**"Education Law"**), to wit: "professional misconduct ... by reason of having been found guilty of improper professional practice or professional misconduct by a duly authorized professional disciplinary agency of another state ..." (Department's Exhibit # 1 and § 6530[9][b] of the Education Law). The Department of Health (**"Petitioner"** or **"Department"**) withdrew this First Specification on the day of the Hearing [T-7, 13]².

Respondent is also charged with professional misconduct within the meaning of § 6530(9)(d) of the Education Law, to wit: professional misconduct ... by reason of having disciplinary action taken or having voluntarily or otherwise surrendered his license after disciplinary action was instituted by a duly authorized professional disciplinary agency of another state, for conduct, which conduct, would, if committed in New York State, constitute professional misconduct under the laws of New York State (Department's Exhibit # 1 and § 6530[9][d] of the Education Law).

¹ P.H.L. § 230(10)(p), fifth sentence.

² Numbers in brackets refer to transcript page numbers [T-].

In order to find that Respondent committed § 6530(9)(d) misconduct, the Hearing Committee must determine: (1) whether Respondent had some disciplinary action taken or instituted against him by a duly authorized professional disciplinary agency of another state; AND (2) whether Respondent's conduct, on which the disciplinary action or surrender was taken, would if committed in New York State, constitute professional misconduct under the laws of New York State.

A copy of the Statement of Charges is attached to this Determination and Order as Appendix I.

FINDINGS OF FACT

The following Findings of Fact were made after a review of the entire record in this matter. These facts represent evidence found persuasive by the Hearing Committee in arriving at a particular finding. All Findings and Conclusions herein were unanimous. The State, who has the burden of proof, was required to prove its case by a preponderance of the evidence. All Findings of Fact made by the Hearing Committee were established by at least a preponderance of the evidence.

1. Respondent was authorized to practice medicine in New York State on April 23, 1976 by the issuance of license number 126976 by the New York State Education Department (Department's Exhibits # 1 & # 2)³; (Respondent's Exhibits # A & # F); [T-26].
2. Respondent is currently registered to practice medicine in the State of New York (Respondent's Exhibit # I {unsigned registration certificate expiring 08/31/99}); [T-104].
3. On August 21, 1997, Fred Ramey personally served on Respondent a copy of a Notice of Referral Proceeding and a Statement of Charges (Department's Exhibit # 1).

³ Refers to exhibits in evidence submitted by the New York State Department of Health (Department's Exhibit) or exhibits submitted by or on behalf of Dr. Ikramuddin (Respondent's Exhibit).

4. The State Board For Professional Medical Conduct has obtained personal jurisdiction over Respondent (Respondent was timely served and had no objection to the service effected); (P.H.L. § 230[10][d]); (Department's Exhibit # 1); [T-7].

5. The Kentucky Board of Medical Licensure of the Commonwealth of Kentucky ("**Kentucky Board**") is a state agency charged with regulating the practice of medicine pursuant to the laws of the State of Kentucky (Department's Exhibits # 3A, 3B, 3C & 4).

6. On January 12, 1996, the Kentucky Board found probable cause to believe that Respondent's practice of medicine constituted a danger to the health, welfare, and safety of his patients or to the general public (Department's Exhibit # 3B).

7. On January 12, 1996, the Kentucky Board issued an Order of Temporary Suspension of Respondent's certificate to practice medicine in Kentucky (Department's Exhibit # 3B).

8. The Order of Temporary Suspension was issued based on a complaint ("**Complaint**") of Danny M. Clark, M.D. as Chairman of the Kentucky Board (Department's Exhibit # 3C).

9. On February 21, 1996, Respondent was given a hearing, where he was represented by counsel, regarding the Order of Temporary Suspension (Department's Exhibit # 4).

10. On February 28, 1996, the Kentucky Hearing Officer found and concluded that there was substantial evidence presented to believe that Respondent's practice constituted a danger to the health, welfare, and safety of his patients or to the general public. The Hearing Officer indicated that there was substantial evidence to support and continue the Order of Temporary Suspension. (Department's Exhibit # 4).

11. The Order of Temporary Suspension was unsuccessfully challenged by Respondent in the Floyd Circuit Court, the Jefferson Circuit Court, and the Kentucky Court of Appeals (Department's Exhibit # 3A); [T-74-78].

12. On April 24, 1997, an Agreed Order of Suspension/Probation was issued ("1997 Order") and entered by the Kentucky Board (Department's Exhibit # 3A).

13. The 1997 Order was a stipulation agreed to and signed by the Kentucky Board and Respondent, based on their mutual desire to fully resolve the Complaint without further administrative proceedings (Department's Exhibit # 3A); [T-68].

14. The 1997 Order continued Respondent's January 12, 1996 suspension until Respondent successfully completed a Professional Assessment Program to address issues of personal and professional responsibility. Upon successful completion of said program, the Kentucky Board would issue an Order permitting Respondent to return to the practice of medicine under probation supervision until January 12, 2001 (5 years from the issuance of the Order of Temporary Suspension) (Department's Exhibit # 3A).

15. The 1997 Order contained a number of terms and conditions of probation, including:

(1) Respondent is prohibited from performing surgical procedures except as authorized by the Kentucky Board; (2) Respondent must participate in a proctorship program with a surgeon who must directly supervise Respondent on all surgical procedures; (3) once the Kentucky Board is confident of Respondent's surgical knowledge and abilities, Respondent will be permitted to participate in a second opinion/approval program with a surgeon who will review all relevant patient information and must approve the necessity and appropriateness of all surgical procedures proposed by Respondent; (4) Respondent must comply with very strict and rigorous reporting procedures to the Kentucky Board; and (5) Respondent must obtain a minimum of 40 hours of Continuing Medical Education ("CME") in surgical procedures subjects in addition to any other CME requirements

(Department's Exhibit # 3A).

16. The 1997 Order was based on Respondent's:

- (a) failures to conform to the standard of acceptable and prevailing surgical care and practice (as to patients A, G, H, E, F, & B); and
- (b) deviations from the standard of care required in Kentucky (as to patients A, G, & B); and
- (c) failures to have a clear plan of treatment (as to patients A and G); and
- (d) gross negligence (as to patient E); and
- (e) failure to understand what was going on (as to patient F); and
- (f) unethical conduct (as to patient C).

(Department's Exhibit # 3A).

17. In the 1997 Order, Respondent's treatment of patient D was found to be reasonable. In the 1997 Order, no information was provided as to patients "I" through "M" (Department's Exhibit # 3A).

18. The conduct, in Kentucky, by Respondent, as indicated in the 1997 Order, includes: the failure to provide appropriate treatment, failure to order appropriate tests, the ordering of inappropriate and sometimes contraindicated tests or treatment, the failure to perform adequate physical exams; the failure to take adequate patient histories, a lack of basic surgical knowledge, and falsification of a medical record (Department's Exhibit # 3A).

19. The Kentucky Board concluded:

After hearing all of the evidence submitted by the parties, there would be sufficient evidence in the record for the Hearing Panel to conclude by a preponderance of the evidence that the licensee had violated KRS 311.595(9)⁴, as defined in KRS 311.597(3)⁵ and (4), and that he had violated KRS 311.595(10).

(Department's Exhibit # 3A).

20. Respondent's conduct constituted violations of Kentucky Statutes (KRS) [§ 311.595(9) & § 311.595(10)]; (Department's Exhibit # 3A).

21. The Hearing Committee accepts the 1997 Order and adopts the contents without repeating it as part of its own Findings of Fact (Department's Exhibit # 3A).

22. On June 9, 1997, the Kentucky Board issued an Order Terminating Suspension; and an Order Placing Licensee on Probation (Respondent's Exhibit # G).

⁴ 311.595 Denial, probation, suspension, or revocation of licenses and permits. ... the board may ... place a licensee on probation for a period not to exceed five (5) years; suspend a license for a period not to exceed five (5) years; limit or restrict a license for an indefinite period; or revoke any license heretofore or hereafter issued by the board, upon proof that the licensee has:

(9) Engaged in dishonorable, unethical, or unprofessional conduct of a character likely to deceive, defraud, or harm the public or any member thereof;

(10) Knowingly made, or caused to be made, or aided or abetted in the making of, a false statement in any document executed in connection with the practice of his profession;

⁵ 311.597 Acts declared to constitute dishonorable, unethical or unprofessional conduct. As used in KRS 311.595(9), "dishonorable, unethical, or unprofessional conduct of a character likely to deceive, defraud, or harm the public or any member thereof" shall include, but not be limited to, the following acts by a licensee:

(3) A serious act, or a pattern of acts committed during the course of his medical practice which, under the attendant circumstances, would be deemed to be gross incompetence, gross ignorance, gross negligence, or malpractice.

(4) Conduct which is calculated or has the effect of bringing the medical profession into disrepute, including, but not limited to, any departure from, or failure to conform to the standards of acceptable and prevailing medical practice within the Commonwealth of Kentucky, and any departure from, or failure to conform to the principles of medical ethics of the American Medical Association or the code of ethics of the American Osteopathic Association. For the purposes of this subsection, actual injury to a patient need not be established.

23. In 1995 Respondent was charged by the New York State Board for Professional Medical Conduct with professional misconduct. Respondent agreed to resolve those charges by not contesting them. Respondent entered into a Consent Order which placed him on probation for two years (Department's Exhibit # 5).

CONCLUSIONS OF LAW

The Hearing Committee makes the following conclusions, pursuant to the Findings of Fact listed above. All conclusions resulted from a unanimous vote of the Hearing Committee.

The Hearing Committee concludes that the Factual Allegations (paragraphs 1, 2, and 3)⁶, from the August 19, 1997 Statement of Charges, are SUSTAINED.

The Hearing Committee further concludes, based on the above Factual Conclusion, and all of the evidence presented, that the SECOND SPECIFICATION OF CHARGES in the Statement of Charges is SUSTAINED.

The Hearing Committee concludes that the Department of Health has shown by a preponderance of the evidence that Respondent had some disciplinary action instituted against him by the State of Kentucky through its Kentucky Board, a duly authorized professional disciplinary agency. The Hearing Committee also concludes that Respondent's professional conduct in Kentucky would constitute professional misconduct under the laws of New York State. The Department of Health has met its burden of proof.

⁶ Paragraph # 4 is a conclusion rather than a factual allegation.

I Professional Misconduct under § 6530(9)(d) of the Education Law.

The Kentucky Board is a duly authorized professional disciplinary agency. In January 1996, the State of Kentucky, through the Kentucky Board instituted disciplinary action against Respondent based on the filing of a complaint and issued an Order of Temporary Suspension. In February 1996, Respondent was given a hearing, where he was represented by counsel, regarding the Order of Temporary Suspension. The Hearing Officer found that there was substantial evidence presented to support and continue the Order of Temporary Suspension.

The disciplinary action instituted against Respondent by the Kentucky Board was subsequently settled by the Kentucky Board and Respondent based on the issuance of an agreed Order of Suspension/Probation. Kentucky's actions resulted in a suspension of Respondent's medical license in Kentucky for more than 15 months. Respondent was permitted to return to the practice of medicine in Kentucky after the successful completion of a professional assessment program. On June 9, 1997, the Order of Suspension was terminated and Respondent was permitted to return to the practice of medicine in Kentucky, subject to very strict terms and conditions of probation. The Kentucky probation is effective until January 12, 2001.

The Hearing Committee finds and determines that Respondent's conduct on which the disciplinary action was taken would, if committed in New York State, constitute professional misconduct under at least § 6530(2)⁷; § 6530(3)⁸; § 6530(4)⁹; and § 6530(5)¹⁰ of the Education Law of New York State.

⁷ Each of the following is professional misconduct... Practicing the profession fraudulently or beyond its authorized scope;

⁸ Each of the following is professional misconduct... Practicing the profession with negligence on more than one occasion;

⁹ Each of the following is professional misconduct... Practicing the profession with gross negligence on a particular occasion;

¹⁰ Each of the following is professional misconduct... Practicing the profession with incompetence on more than one occasion;

The 1997 Order contains facts and conclusions which establish that Respondent's conduct constituted grounds for action against Respondent's Kentucky medical license. The 1997 Order has stipulated conclusions of guilt of violations of Kentucky Statutes. The record clearly establishes that Respondent committed professional misconduct in Kentucky.

Taking the information¹¹ contained in the stipulation of the Kentucky Board and Respondent as true, the Hearing Committee finds that the record establishes that Respondent failed to conform to the standard of acceptable and prevailing surgical care and practice for at least 6 patients; deviated from the standard of care for at least 3 patients; and failed to have a clear plan of treatment for at least 2 patients. These acts or courses of conduct, if committed in New York, would constitute negligence on more than one occasion. Respondent also committed the New York equivalent of gross negligence (as to patient E). Respondent's conduct in Kentucky (repeated acts of negligence) and his failure to understand what was going on as to some of his patients, if committed in New York, indicates and would constitute incompetence on more than one occasion. In addition. Respondent's falsification of a medical record shows unethical conduct and, if committed in New York, would constitute practicing fraudulently and possibly moral unfitness (§ 6530[20]). Respondent's act would also constitute the failure to maintain an accurate medical record (§ 6530[32]).

Respondent's claim that "mere malpractice on one occasion could be deemed actionable contrary to the provisions of Section 6530 of the Education Law" does not apply here since there were numerous acts of negligence by Respondent. Respondent's additional claim that New York law contains no "standard dealing with any and all possible false statements in any and all documents" is also in error. In New York, under the facts of this case, these actions are called fraud (§ 6530(2) and/or § 6530[20] and/or § 6530[32] of the Education Law).

¹¹ The Hearing Committee does not repeat each medical treatment for each patient since the information is contained in the 1997 Order which was adopted and incorporated into our Findings of Fact.

With regard to the testimony presented by Respondent, the Hearing Committee notes the existence of bias. Obviously Respondent had the greatest amount of interest in the results of these proceedings. Respondent was also assessed according to his training, experience, credentials, demeanor and credibility. The Hearing Committee finds Respondent's recounting of what occurred in Kentucky to be inconsistent and confused. Respondent was also evasive in answering questions. The Hearing Committee finds that Respondent's testimony lacked credibility.

The Hearing Committee finds that Respondent's conduct, if committed in New York State, would constitute professional misconduct under the Education Law of New York.

Therefore, Respondent has committed professional misconduct pursuant to § 6530(9)(d) of the Education Law.

DETERMINATION

The Hearing Committee, pursuant to the Findings of Fact and Conclusions of Law set forth above, unanimously determines that Respondent's license to practice medicine in New York State should be REVOKED.

This determination is reached after due and careful consideration of the full spectrum of penalties available pursuant to P.H.L. § 230-a, including:

(1) Censure and reprimand; (2) Suspension of the license, wholly or partially; (3) Limitations of the license; (4) Revocation of license; (5) Annulment of license or registration; (6) Limitations; (7) The imposition of monetary penalties; (8) A course of education or training; (9) Performance of public service; and (10) Probation.

The record clearly establishes that Respondent committed significant misconduct in Kentucky.

In determining an appropriate measure of discipline to impose, the Hearing Committee is bound by the documentary evidence presented. Respondent has failed to provide any meaningful mitigation as to the sanctions to be imposed. Respondent demonstrated a lack of insight as to what occurred in Kentucky and is still in denial. Respondent's failure to "understand" and "acknowledge" that there was serious misconduct in Kentucky is very troubling to the Hearing Committee. Respondent's claim that he did not agree with the conclusions of the 1997 Order when he signed it is specious at best.

With regard to the issue of sanctions, the Hearing Committee recognizes that it is a generally accepted principle that the state where Respondent lived and practiced medicine at the time of the offense has the greatest interest in the issue and the public policy considerations relevant to such disciplinary actions. The sanctions issued by Kentucky have been reviewed and carefully considered by the Hearing Committee. Although the Kentucky sanctions are onerous and burdensome, based on all the evidence presented, the Hearing Committee determines that the sanctions imposed by Kentucky are inadequate to protect the People of the State of New York.

In determining an appropriate measure of discipline to impose, the Hearing Committee has considered that Respondent has not confronted his misconduct. The Hearing Committee has not accepted Respondent's claim of disagreement with the 1997 Order. The proper jurisdiction to address Respondent's "guilt" or "innocence" of misconduct in Kentucky was in Kentucky.

The Hearing Committee also recognizes that the terms and conditions of probation imposed by the Kentucky Board indicate a severe concern by the Kentucky Board regarding Respondent's medical practice and judgment. The Hearing Committee reviewed some of the conditions of probation, such as, that Respondent is prohibited from performing surgical procedures except as authorized by the Kentucky Board; and that Respondent must participate in a proctorship program with a surgeon who must directly supervise Respondent on all surgical procedures.

The Hearing Committee considered imposing the same sanction as Kentucky. In order to do that, the Hearing Committee needed to be assured, or at least receive some proof, that Respondent is competent to begin to practice medicine in New York. The evidence presented by Respondent does not indicate this competency. The Hearing Committee determines that the same sanctions imposed by Kentucky are not appropriate, in this case, for New York. Additionally, the Hearing Committee believes that, at least in Kentucky, where Respondent has been practicing medicine for the past 19 years, he may have the support of other physicians which he can use to fulfill the Kentucky terms and conditions of probation (such as the two physicians that testified, by telephone, at the Hearing). Respondent has not shown that any support is available in New York which would allow for meaningful practice monitoring.

Respondent, after being suspended from the practice of medicine for more than 15 months and voluntarily signing a stipulation admitting that he engaged in dishonorable, unethical, or unprofessional conduct likely to deceive, defraud, or harm the public, asserts that his actions were in accordance with the degree of knowledge, care and skill expected of the average physician in Kentucky. The Hearing Committee finds Respondent's position incredulous considering the undenied findings contained in the 1997 Order.

A review of the 1997 Order shows no denial by Respondent of the allegations contained in the Kentucky Complaint and no denial by Respondent of the stipulated facts or conclusions of law contained in that 1997 Order as asserted by Respondent to the Hearing Committee in New York. The 1997 Order contains very specific findings and conclusions by the Kentucky Board. Respondent read and agreed to the 1997 Order. No showing was made by the Respondent of any incapacities to sign said Stipulation/Order.

The Hearing Committee also notes that Respondent has been disciplined by New York in the past. In this case, this fact was not given much weight in determining the above sanction. It is, however, noted because of Respondent's claim of naiveté about the impact (and meaning) of his stipulation in Kentucky (including Respondent's irrelevant assertions that he was not represented by an attorney when he signed the 1997 Order/stipulation).

The Hearing Committee also notes that if Respondent reapplies for a license to practice medicine in New York, he must provide proof of successful participation in or completion of the Kentucky requirements.

For the reasons set forth above and the fact that Respondent has failed to provide the New York Hearing Committee with any meaningful mitigating factors, the sanction of revocation is imposed. Accordingly, Respondent's license to practice medicine in the State of New York should be revoked.

The Hearing Committee concludes that if this case had been held in New York, on the facts presented relative to Respondent's gross negligence, negligence and incompetence on more than one occasion, and fraudulent practice, the Hearing Committee would have voted unanimously for revocation of Respondent's license.

The Hearing Committee considers Respondent's misconduct to be very serious. Respondent claims to have performed 32,000 surgical procedures over 19 years in Kentucky. Respondent indicated his desire to relocate to New York. With a concern for the health and welfare of patients in New York State, the Hearing Committee determines that revocation of Respondent's license is the only appropriate sanction to impose under the totality of the circumstances presented.

All other issues raised have been duly considered by the Hearing Committee and would not justify a change in the Findings, Conclusions or Determination contained herein.


By execution of this Determination and Order, all members of the Hearing Committee certify that they have read and considered the complete record of this proceeding.

ORDER

Based on the foregoing, **IT IS HEREBY ORDERED THAT:**

1. The Second Specification of professional misconduct contained within the Statement of Charges (Department's Exhibit # 1) is **SUSTAINED**, and
2. The First Specification of professional misconduct contained within the Statement of Charges (Department's Exhibit # 1) is **WITHDRAWN** and therefore **DISMISSED**, and
3. Respondent's license to practice medicine in the State of New York is hereby **REVOKED**.

DATED: New York, New York
November 10, 1997


JOSEPH G. CHANATRY, M.D., (Chair),
TERESA S. BRIGGS, M.D.
NANCY J. MACINTYRE, R.N., Ph.D.

Syed Ikramuddin, M.D.
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Corning Tower Building, Room 2412
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Albany, New York 12237-0029

APPENDIX I

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

-----X

IN THE MATTER	:	STATEMENT
OF	:	OF
SYED IKRAMUDDIN, M.D.	:	CHARGES

-----X

Syed Ikramuddin, M.D., the Respondent, was authorized to practice medicine in New York State on April 23, 1976 by the issuance of license number 126976 by the New York State Education Department. The Respondent is not currently registered to practice medicine in the State of New York.

FACTUAL ALLEGATIONS

1. Respondent's license to practice medicine in the Commonwealth of Kentucky became subject to disciplinary action by entry of an Order of Temporary Suspension and a Complaint of the Kentucky Board of Medical Licensure on January 12, 1996.

2. By Agreed Order of Suspension/Probation entered on April 24, 1997, the Commonwealth of Kentucky State Board of Medical Licensure further suspended Respondent's license to practice medicine in the Commonwealth of Kentucky and placed Respondent on probation until January 12, 2001.

3. The suspension and probationary period imposed upon Respondent by the Kentucky Board of Medical Licensure was based on Respondent's failure to conform to the standard of acceptable and prevailing surgical practice in treating eleven patients, gross negligence on one occasion, and unethical conduct on one occasion. Specifically, this conduct included, but was not limited to, Respondent's failure to take adequate patient histories, failure to perform adequate physical examinations, failure to provide and/or order appropriate treatment, a lack of basic surgical knowledge, and falsification of a medical record.

4. The conduct resulting in the suspension and disciplinary action involving Respondent's license would constitute professional misconduct if committed in New York State under New York Education Law §6530(3) practicing the profession with negligence on more than one occasion; §6530(4) practicing the profession with gross negligence on a particular occasion; §6530(5) practicing the profession with incompetence on more than one occasion and §6530(20) practicing the profession fraudulently (McKinney Supp. 1997).

FIRST SPECIFICATION

Respondent is charged with professional misconduct under New York Education Law §6530(9)(b) (McKinney Supp. 1997) in that he has been found guilty of professional misconduct by a duly authorized professional disciplinary agency of another state, where the conduct upon which the finding was based would, if

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10/15/97
(1422)

committed in New York State, constitute professional misconduct under the laws of New York State, in that Petitioner charges the facts of paragraphs 1, 2, 3 and/or 4.

SECOND SPECIFICATION

Respondent is charged with professional misconduct under New York Education Law § 6530(9)(d) (McKinney Supp. 1997) in that disciplinary action has been taken against Respondent's license by a duly authorized professional disciplinary agency of another 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 State, in that Petitioner charges the facts of paragraphs 1, 2, 3 and/or 4.

DATED: *August 19,* 1997
Albany, New York

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