

THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, N.Y. 12234

OFFICE OF PROFESSIONAL DISCIPLINE  
ONE PARK AVENUE, NEW YORK, NEW YORK 10016-5802

**RECEIVED**  
JUN 19 1991

OFFICE OF PROFESSIONAL  
MEDICAL CONDUCTS, 1991

Anthony Atkin, Physician  
35 North Bayles Avenue  
Port Washington, N.Y. 11050

Re: License No. 145358

Dear Dr. Atkin:

Enclosed please find Commissioner's Order No. 12021. This Order goes into effect five (5) days after the date of this letter.

**If the penalty imposed by the Order in your case is a revocation or a surrender of your license, you must deliver your license and registration to this Department within ten (10) days after the date of this letter. Your penalty goes into effect five (5) days after the date of this letter even if you fail to meet the time requirement of delivering your license and registration to this Department.**

**If the penalty imposed by the Order in your case is a revocation or a surrender of your license, you may, pursuant to Rule 24.7 (b) of the Rules of the Board of Regents, a copy of which is attached, apply for restoration of your license after one year has elapsed from the effective date of the Order and the penalty; but said application is not granted automatically.**

Very truly yours,

DANIEL J. KELLEHER  
Director of Investigations

By:

*Gustave Martine*  
GUSTAVE MARTINE  
Supervisor

DJK/GM/er

**CERTIFIED MAIL - RRR**

cc: Robert Del Grosso, Esq.  
114 Old Country Road  
Mineola, N.Y. 11501

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

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IN THE MATTER

OF

ANTHONY ATKIN

: APPLICATION TO

: SURRENDER

: LICENSE  
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STATE OF NEW YORK)

ss.:

COUNTY OF NASSAU)

ANTHONY ATKIN, being duly sworn, deposes and says:

On or about June 19, 1979, I was licensed to practice as a physician in the State of New York having been issued License No. 145358 by the New York State Education Department.

I am not currently registered with the New York State Education Department to practice as a physician in the State of New York. My current mailing address is C/O Robert Del Grosso, Esq., 114 Old Country Road, Mineola, New York 11501. Mr. Del Grosso is my attorney in this matter.

I understand that I have been charged with one Specification of professional misconduct as set forth in the Statement of Charges, annexed hereto, made a part hereof and marked as Exhibit "A".

I am applying to the Board of Regents for permission to surrender my license as a physician in the State of New York on the grounds that I admit guilt to the Specification.

I hereby make this application to the Board of Regents and request that it be granted.

I understand that, in the event that the application is not granted by the Board of Regents, nothing contained herein shall be binding upon me or construed to be an admission of any act of misconduct alleged or charged against me, such application shall not be used against me in any way and shall be kept in strict confidence during the pendency of the professional misconduct disciplinary proceeding; and such denial by the Board of Regents shall be made without prejudice to the continuance of any disciplinary proceeding and the final determination by the Board of Regents pursuant to the provisions of the Education Law.

I agree that, in the event the Board of Regents grants my application, an order of the Commissioner of Education may be issued striking my name from the roster of physicians in the State of New York without further notice to me.

I further agree that the order of the Commissioner shall include a provision that I shall not apply for the restoration of my license until at least one (1) year has elapsed from the effective date of the service of such order. I understand that such application is not automatically granted but may be granted or denied.

No promises of any kind were made to me. I am making this application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner.

*Anthony Atkin*

ANTHONY ATKIN  
Respondent

Sworn to before me this  
1 day of November, 1990

*Paul R. [Signature]*

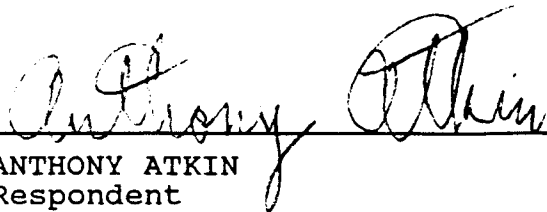
NOTARY PUBLIC

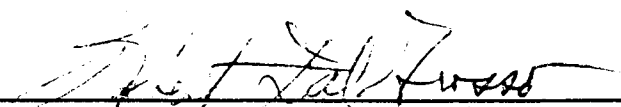
PAUL R. [Signature]  
Notary Public, State of Maryland  
Qualifying for the year 1992

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

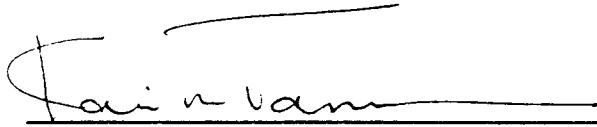
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IN THE MATTER :  
OF : APPLICATION TO  
ANTHONY ATKIN : SURRENDER  
: LICENSE  
:-----

The undersigned agree to the attached application of the Respondent to surrender license.

Date: November 9, 1990   
ANTHONY ATKIN  
Respondent

Date: November 9, 1990   
ROBERT DEL GROSSO, Esq.  
Attorney for Respondent

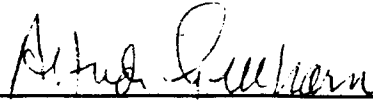
Date: April 24, 1990   
MEMBER, State Board for  
Professional Medical Conduct

Date: April 19, 1990   
KATHLEEN M. TANNER  
Director, Office of Professional  
Medical Conduct

ANTHONY ATKIN

The undersigned has reviewed and agrees to the attached application to surrender license.

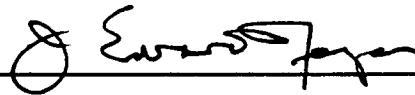
Date: 4/19/91 1991



ALFRED GELLHORN, M.D.  
Director of Medical Affairs  
New York State  
Department of Health

The undersigned, a member of the Board of Regents who has been designated by the Chairman of the Regents Committee on Professional Discipline to review this application to surrender license, has reviewed the attached application to surrender license and recommends to the Board of Regents that the application be granted.

Date: May 3, 1991



MEMBER OF THE BOARD OF REGENTS

EXHIBIT A

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

-----X

IN THE MATTER : STATEMENT  
OF : OF  
ANTHONY ATKIN : CHARGES

-----X

ANTHONY ATKIN M.D., herein called the Respondent, was authorized to practice the profession of medicine in the State of New York on June 19, 1979 by the issuance of license number 145358 by the New York State Education Department. The Respondent is not currently registered with New York State Education Department to practice medicine. His current mailing address, upon information and belief, is C/O Robert DelGrosso, Esq., 114 Old Country Road, Mineola, New York 11501.

SPECIFICATION

1. Respondent is charged with committing professional misconduct within the meaning of N.Y. Educ. Law Section 6509(5)(a)(i) (McKinney 1985) by having been convicted of committing an act constituting a crime under New York State law in that:

On October 18, 1990 Respondent was convicted, upon a guilty plea in Supreme

Court Nassau County, of Attempted  
Criminal Possession of a Weapon, 3rd  
Degree (as defined in N.Y. Penal Law  
Sections 110 and 265.02), a Class E  
felony, and of Criminal Possession of a  
Controlled Substance, 5th Degree, a  
Class D felony.

DATED: New York, New York  
*October 24, 1990*



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CHRIS STERN HYMAN  
Counsel  
Bureau of Professional Medical  
Conduct



**ORDER OF THE COMMISSIONER OF  
EDUCATION OF THE STATE OF NEW YORK**

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**ANTHONY ATKIN**

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**CALENDAR NO. 12021**



# The University of the State of New York

IN THE MATTER

OF

ANTHONY ATKIN  
(Physician)

DUPLICATE  
ORIGINAL  
VOTE AND ORDER  
NO. 12021

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Upon the application of ANTHONY ATKIN, under Calendar No. 12021, which application is made a part hereof, and in accordance with the provisions of Title VIII of the Education Law, it was

**VOTED (May 24, 1991):** That the application of ANTHONY ATKIN, respondent, for permission to surrender respondent's license to practice as a physician in the State of New York be granted; and that the Commissioner of Education be empowered to execute, for and on behalf of the Board of Regents, all orders necessary to carry out the provisions of this vote;

and it is

**ORDERED:** That, pursuant to the above vote of the Board of Regents, said vote and the provisions thereof as well as the application and the provisions thereof are hereby adopted and **SO ORDERED**, and it is further

**ORDERED** that respondent may not apply for the restoration of said license until at least one (1) year has elapsed from the effective date of the service of this order, and it is further

**ORDERED** that this order shall take effect as of the date of the personal service of this order upon the respondent or five days after mailing by certified mail.

ANTHONY ATKIN (12021)

IN WITNESS WHEREOF, I, Thomas Sobol,  
Commissioner of Education of the State of  
New York, for and on behalf of the State  
Education Department and the Board of  
Regents, do hereunto set my hand and affix  
the seal of the State Education Department,  
at the City of Albany, this 31<sup>st</sup> day of

*May*, 1991.

*Thomas Sobol*

Commissioner of Education