



New York State Board for Professional Medical Conduct

433 River Street, Suite 303 Troy, New York 12180-2299 • (518) 402-0863

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

Patrick F. Carone, M.D., M.P.H.
Chair
Ansel R. Marks, M.D., J.D.
Executive Secretary

August 12, 1998

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Irina Osnis, M.D.
c/o George A. Farkas, Esq.
32 Court Street, Suite 408
Brooklyn, New York 11201

RE: License No. 157710

Dear Dr. Osnis:

Enclosed please find Order #BPMC 98-173 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect **August 19, 1998.**

If the penalty imposed by the Order is a surrender, revocation or suspension of this license, you are required to deliver to the Board the license and registration within five (5) days of receipt of the Order.

Board for Professional Medical Conduct
New York State Department of Health
Hedley Park Place, Suite 303
433 River Street
Troy, New York 12180

If the penalty imposed by the Order is a fine, please write the check payable to the New York State Department of Health. Noting the BPMC Order number on your remittance will assist in proper crediting. Payments should be directed to the following address:

Bureau of Accounts Management
New York State Department of Health
Corning Tower, Room 1315
Empire State Plaza
Albany, New York 12237

Sincerely,

A handwritten signature in black ink, appearing to read "Ansel R. Marks". The signature is written in a cursive style with a large initial "A".

Ansel R. Marks, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Claudia M. Bloch, Esq.

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

**IN THE MATTER
OF
IRINA OSNIS, M.D.**

**CONSENT
AGREEMENT
AND
ORDER**

BPMC #98-173

STATE OF NEW YORK)
COUNTY OF KINGS) ss.:

IRINA OSNIS, M.D., being duly sworn, deposes and says:

That on or about March 10, 1984, I was licensed to practice as a physician in the State of New York, having been issued License No. 157710 by the New York State Education Department.

My current address is 415 Oceanview Avenue, Brooklyn, New York 11235, and I will advise the Director of the Office of Professional Medical Conduct of any change of my address.

I understand that the New York State Board for Professional Medical Conduct has charged me with two specifications of professional misconduct.

A copy of the Statement of Charges is annexed hereto, made a part hereof, and marked as Exhibit "A".

I admit guilt to the first specification, (violation of N.Y. Educ. Law Sec. 6530(33), failing to supervise) in full satisfaction of the charges against me. I hereby agree to the following penalty:

A one (1) year period of suspension, stayed; a two (2) year period of probation, in accordance with the terms set forth in Exhibit "B" annexed hereto; and a fine of \$7,500.

I further agree that the Consent Order for which I hereby apply

shall impose a condition that, except during periods of actual suspension, I maintain current registration of my license with the New York State Education Department Division of Professional Licensing Services, and pay all registration fees. This condition shall be in effect beginning thirty days after the effective date of the Consent Order and continuing until the full term of the Order has run, and until any associated period of probation and all probation terms have been completed and satisfied. I hereby stipulate that any failure by me to comply with such condition shall constitute misconduct as defined by New York State Education Law §6530(29)(McKinney Supp 1997).

I understand and agree that the fine is payable in full within thirty (30) days of the effective date of this Order. Payments must be submitted to:

Bureau of Accounts Management
New York State Department of Health
Empire State Plaza
Corning Tower, Room 1245
Albany, New York 12237

I agree that in the event I am charged with professional misconduct in the future, this agreement and order shall be admitted into evidence in that proceeding.

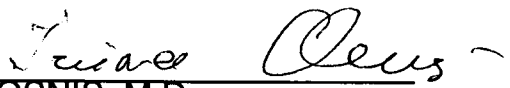
I hereby make this Application to the State Board for Professional Medical Conduct (the Board) and request that it be granted.

I understand that, in the event that this Application is not granted by the

Board, 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 shall be made without prejudice to the continuance of any disciplinary proceeding and the final determination by the Board pursuant to the provisions of the Public Health Law.

I agree that, in the event the Board grants my Application, as set forth herein, an order of the Chairperson of the Board shall be issued in accordance with same. I agree that such order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the Consent Order to me at the address set forth in this agreement, or to my attorney, or upon transmission via facsimile to me or my attorney, whichever is earliest.

I am making this Application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner. In consideration of the value to me of the acceptance by the Board of this Application, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive any right I may have to contest the Consent Order for which I hereby apply, whether administratively or judicially, and ask that the Application be granted.


IRINA OSNIS, M.D.
RESPONDENT

Sworn to before me this

day of

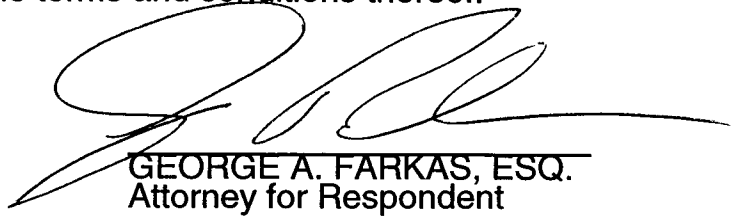
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NOTARY PUBLIC


GEORGE FARKAS
Notary Public, State of New York
No. 24 - 4626280
Qualified in Kings County
Commission Expires July 30, 2000

The undersigned agree to the attached application of the Respondent and to the proposed penalty based on the terms and conditions thereof.

DATE: 7/28/98


GEORGE A. FARKAS, ESQ.
Attorney for Respondent

DATE: 8/3/98


CLAUDIA MORALES BLOCH
Associate Counsel
Bureau of Professional
Medical Conduct

DATE: 8/4/98


ANNE F. SAILE
Director
Office of Professional
Medical Conduct

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

IN THE MATTER
OF
IRINA OSNIS, M.D.

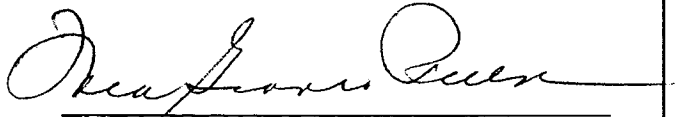
CONSENT
ORDER

Upon the proposed agreement of IRINA OSNIS, M.D. (Respondent) for Consent Order, which application is made a part hereof, it is agreed to and ORDERED, that the application and the provisions thereof are hereby adopted and so ORDERED, and it is further

ORDERED, that this order shall take effect as of the date of the personal service of this order upon Respondent, upon receipt by Respondent of this order via certified mail, or seven days after mailing of this order by certified mail, whichever is earliest.

SO ORDERED.

DATED: August 7, 1998


THEA GRAVES PELLMAN
Vice-Chairperson
State Board for Professional
Medical Conduct

2 IN THE MATTER
3 OF
4 IRINA OSNIS, M.D.
5

STATEMENT
OF
CHARGES

6
7 IRINA OSNIS, M.D., the Respondent, was authorized to practice medicine in
8 New York State on or about March 10, 1984, by the issuance of license number
9 157710 by the New York State Education Department.
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11 FACTUAL ALLEGATIONS
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- 13 A. From on or about June 8, 1994 through on or about December 1, 1994,
14 Respondent undertook the care and treatment of Patient A at her offices
15 located at 1648 14th Street, Brooklyn, N.Y. 11229.
16
- 17 B. On numerous visits between on or about June 9, 1994 and on or about
18 November 29, 1994, Respondent treated Patient A with physical therapy
19 which was performed by employees of Respondent under her direction and
20 supervision.
21
- 22 C. Upon information and belief, Respondent employed a physician assistant who
23 made entry in Respondent's office record for a visit by Patient A to
24 Respondent on or about October 28, 1994. Said physician assistant(s) was
25 authorized to practice only under the direction and supervision of the
26 Respondent.
27

28 EXHIBIT "A"

1 D. Payment claims for services rendered by physician assistant(s) and physical
2 therapists were made under Respondent's name as bills generated by her for
3 payment to be made directly to her.
4

5 E. Respondent, and/or her employee physician assistant(s) and/or physical
6 therapists, made payment claims to Patient A's employer's Worker's
7 Compensation carrier, Eagle Insurance Insurance Co., for services rendered
8 to Patient A which did not take place, to wit for the following:
9

10 1. Physical therapy on:
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- 12 a. July 5, 1994,
- 13 b. July 7, 1994,
- 14 c. July 18, 1994,
- 15 d. July 22, 1994,
- 16 e. July 29, 1994,
- 17 f. August 16, 1994,
- 18 g. August 18, 1994,
- 19 h. August 30, 1994,
- 20 i. September 13, 1994,
- 21 j. September 16, 1994,
- 22 k. September 21, 1994,
- 23 l. October 11, 1994,
- 24 m. October 13, 1994,
- 25 n. October 25, 1994,
- 26 o. October 27, 1994,
- 27 p. November 23, 1994,
- 28 q. November 25, 1994.

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- 2. Somatosensory testing on:
 - a. September 26, 1994,
 - b. September 27, 1994.

- 3. Intermediate examination on October 28, 1994.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

FAILURE TO SUPERVISE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law Sec. 6530(33) (McKinney Supp. 1998) by failing to exercise appropriate supervision over persons who are authorized to practice only under the supervision of the licensee as alleged in the facts of the following:

- 1. The facts in paragraphs A through E, E(1)(a) through E(1)(q), E(2)(a), E(2)(b) and E(3).

SECOND SPECIFICATION

FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law Sec. 6530(32) (McKinney Supp. 1998) by failing to maintain a record for the patient which accurately reflects the evaluation and treatment of the patient as alleged in the facts of the following:

- 2. The facts in paragraphs A through E, E(1)(a) through E(1)(q), E(2)(a), E(2)(b) and E(3).

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DATED: July , 1998
New York, New York

ROY NEMERSON
Deputy Counsel
Bureau of Professional
Medical Conduct

EXHIBIT "B"

Terms of Probation

1. Respondent shall conduct herself in all ways in a manner befitting his/her professional status, and shall conform fully to the moral and professional standards of conduct and obligations imposed by law and by her profession.
2. Respondent shall submit written notification to the New York State Department of Health addressed to the Director of the Office of Professional Medical Conduct, New York State Department of Health, 433 River Street, Suite 303, Troy, NY 12180-2299; said notice is to include a full description of any employment and practice, professional and residential addresses and telephone numbers within or without New York State, and any and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty days of each action.
3. Respondent shall fully cooperate with and respond in a timely manner to requests from OPMC to provide written periodic verification of Respondent's compliance with the terms of this Order. Respondent shall personally meet with a person designated by the Director of OPMC as requested by the Director.
4. Any civil penalty not paid by the date prescribed herein shall be subject to all provisions of law relating to debt collection by New York State. This includes but is 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 section 171(27)]; State Finance Law section 18; CPLR section 5001; Executive Law section 32].
5. The period of probation shall be tolled during periods in which Respondent is not engaged in the active practice of medicine in New York State. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in or intends to leave the active practice of medicine in New York State for a period of thirty (30) consecutive days or more. Respondent shall then notify the Director again prior to any change in that status. The period of probation shall resume and any terms of probation which were not fulfilled shall be fulfilled upon Respondent's return to practice in New York State.
6. Respondent's professional performance shall be reviewed by the Director of OPMC. This review will include, but shall not be limited to, a review of Respondent's and her employee's office records, patient records and/or hospital charts, patient logs, and billing records. This review will also include interviews with Respondent and/or her staff at her practice locations or OPMC offices, and periodic, unannounced visits to Respondent's practice location(s) with full and complete access to review documents as set forth herein.
7. Respondent shall maintain legible and complete medical records which accurately reflect the evaluation and treatment of patients. The medical records shall contain all information required by State rules and regulations

regarding controlled substances.

8. Respondent shall fully cooperate and comply with all terms of probation set forth herein and with terms, conditions, restrictions, limitations and penalties to which she is subject pursuant to the Order and shall assume and bear all costs related to compliance. Upon receipt of evidence of noncompliance with, or any violation of these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding and/or any such other proceeding against Respondent as may be authorized pursuant to the law.