



*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

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

May 11, 1998

**CERTIFIED MAIL-RETURN RECEIPT REQUESTED**

Ana Maria Santi, M.D.  
3 Holder Place  
Forest Hills, New York 11375

RE: License No. 113491

Dear Dr. Santi:

Enclosed please find Order #BPMC 98-86 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect **May 11, 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

Sincerely,

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

Enclosure

cc: Wilfred T. Friedman, Esq.  
The Bar Building  
36 West 44th Street  
New York, New York 10036

Roy Nemerson, Esq.

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

**IN THE MATTER  
OF  
ANA MARIA SANTI, M.D.**

**CONSENT  
AGREEMENT  
AND  
ORDER OF  
INDEFINITE  
SUSPENSION**

BPMC #98-86

STATE OF NEW YORK )  
COUNTY OF *New York* ) ss.:

**ANA MARIA SANTI, M.D., being duly sworn, deposes and says:**

That on or about August 1, 1972, I was licensed to practice as a physician in the State of New York, having been issued License No. 113491 by the New York State Education Department. I am currently subject to an Order of the Commissioner of Health, issued pursuant to §230(12) of the Public Health Law, as well as BPMC Order #94-69, attached and incorporated.

My current address is 3 Holder Place, Forest Hills, New York 11375, 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 eight specifications of professional misconduct.

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

I do not contest these specifications, in full satisfaction of the charges against me. I hereby agree to the following penalty:

**My license to practice medicine in the State of New York shall be suspended wholly and indefinitely.**

I shall be subject to the following Conditions, which I hereby stipulate and agree may be imposed pursuant to §230 of the Public Health Law

### CONDITIONS

1. I shall, at all times during the period of suspension, be required to cooperate fully with any and all investigations and prosecutions, providing full and truthful information and testimony regarding any matter within my knowledge. Such cooperation shall be provided, at the direction of the Director of the Office of Professional Medical Conduct, to any and all governmental entities, Federal, State, or local, in investigations and or litigation of any matter, whether administrative, civil, or criminal.

2. I shall, at all times during the period of suspension, and thereafter for the duration of this or any subsequent order, completely abstain from the use of alcohol or any other mood altering drug or substance, except to the extent that I may comply with the course of treatment prescribed by a licensed physician who is familiar with my complete history of substance abuse.

3. I shall provide quarterly signed, sworn, notarized written statements, subject to civil and criminal penalties for perjury, to the Director of OPMC, truthfully:

JS.

a. stating whether or not I have complied with the absolute prohibition, imposed by this order, against my engaging in any practice of medicine <sup>IN THE STATE OF NEW YORK</sup> during the calendar quarter immediately preceding such statement; and

b. listing every medical office or facility at which I have, during the immediately preceding calendar quarter, engaged in any activity other than that of being treated.

c. listing a full description of any employment, of any nature, engaged in during the immediately preceding quarter. \*

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 1998). I further explicitly recognize that during the period of my suspension, I will not have the lawful authority to engage <sup>IN THE STATE OF NEW YORK</sup> in any practice of medicine and I acknowledge that any such practice could lead to both additional disciplinary proceedings and criminal prosecution for the unlawful practice of medicine.

JS.

With the proviso that such indefinite period of suspension shall continue for no less than 30 months, I shall be permitted, upon compliance with all conditions and after the passage of said minimum period, to petition the State Board for Professional Medical Conduct for a Modification Order, staying such suspension and permitting me to practice medicine <sup>IN THE STATE OF NEW YORK</sup> under whatever limitation(s), term(s) of

JS.

probation, or further conditions the Board, in its reasonable discretion, exercised by a Committee on Professional Conduct, after I have met a burden of proof and persuasion in a proceeding as set forth in this agreement. may deem appropriate. I understand and agree that the Committee's exercise of such discretion shall not be reviewable through recourse to the Administrative Review Board.

I understand and hereby agree that my right to petition, and the Board's authority to grant such petition, shall be subject to conditions precedent including but not limited to that I comply at all times with each of Conditions 1 through 3, above.

Specifically, upon my completion of the minimum period of suspension, upon my compliance with the Conditions, and upon my providing to the Director of a certain minimal, *prima facie* evidence of fitness and clinical competence to practice medicine, as set forth in the above enumerated Conditions and in Exhibit B, attached hereto, I may request a modification of such sanction, as further set forth in Exhibit B.

I agree that in any proceeding before the State Board for Professional Medical Conduct, whether in regard to a petition regarding the instant Consent Order, or in the event I am charged with professional misconduct in the future, this agreement and order shall be admitted into evidence in such 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 this Application.

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 further proceedings 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.

*Ana Maria Santi*  
ANA MARIA SANTI, M.D.  
RESPONDENT

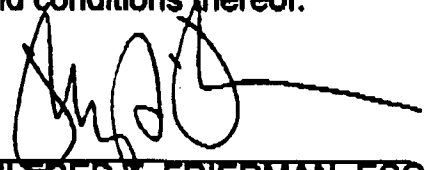
Sworn to before me this  
28<sup>th</sup> day of April, 1998.

*[Signature]*  
NOTARY PUBLIC


WILFRED T. FRIEDMAN  
NOTARY PUBLIC, State of New York  
No. 31-4954326  
Qualified in New York County  
Commission Expires August 11, 1999

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

DATE: 4/28/98

  
WILFRED V. FRIEDMAN, ESQ.  
Attorney for Respondent

DATE: 4/29/98

  
ROY NEMERSON  
Deputy Counsel  
Bureau of Professional  
Medical Conduct

DATE: May 5, 1998

  
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  
ANA MARIA SANTI, M.D.


CONSENT  
AGREEMENT  
AND  
ORDER OF  
INDEFINITE  
SUSPENSION

Upon the proposed agreement of ANA MARIA SANTI, 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 be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the Consent Order to Respondent at the address set forth in this agreement or to Respondent's attorney by certified mail, or upon transmission via facsimile to Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: May 6, 1998

  
PATRICK F. CARONE, M.D., M.P.H.  
Chairperson  
State Board for Professional  
Medical Conduct



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

-----X

IN THE MATTER : : COMMISSIONER'S  
OF : : ORDER AND  
ANA MARIA SANTI, M.D. : NOTICE OF HEARING

-----X

TO: ANA MARIA SANTI, M.D.

The undersigned, Barbara A. DeBuono, M.D., M.P.H., as Commissioner of the New York State Department of Health, after an investigation, upon the recommendation of a committee on professional medical conduct of the State Board for Professional Medical Conduct, and upon the Statement of Charges attached hereto and made a part hereof, has determined that the continued practice of medicine in the State of New York by Ana Marie Santi, the Respondent, constitutes an imminent danger to the health of the people of this state.

It is therefore:

ORDERED, pursuant to N.Y. Pub. Health Law Section 230(12), that effective immediately, Ana Marie Santi, Respondent, shall not practice medicine in the State of New York. This Order shall remain in effect unless modified or vacated by the Commissioner of Health pursuant to N.Y. Pub. Health Law Section 230(12).

PLEASE TAKE NOTICE that a hearing will be held pursuant to the provisions of N.Y. Pub. Health Law Section 230, and N.Y. State Admin. Proc. Act Sections 301-307 and 401. The hearing will be conducted before a committee on professional conduct of the State Board for Professional Medical Conduct on the 25th day

EXHIBIT A 4/98

of March, 1998 at the 6th Floor, 5 Penn Plaza, New York, New York, and at such other adjourned dates, times and places as the committee may direct. The Respondent may file an answer to the Statement of Charges with the below-named attorney for the Department of Health.

At the hearing, evidence will be received concerning the allegations set forth in the Statement of Charges, which is attached. A stenographic record of the hearing will be made and the witnesses at the hearing will be sworn and examined. The Respondent shall appear in person at the hearing and may be represented by counsel. The Respondent has the right to produce witnesses and evidence on her behalf, to issue or have subpoenas issued on his behalf for the production of witnesses and documents and to cross-examine witnesses and examine evidence produced against him. A summary of the Department of Health Hearing Rules is enclosed. Pursuant to Section 301(5) of the State Administrative Procedure Act, the Department, upon reasonable notice, will provide at no charge a qualified interpreter of the deaf to interpret the proceedings to, and the testimony of, any deaf person.


The hearing will proceed whether or not the Respondent appears at the hearing. Scheduled hearing dates are considered dates certain and, therefore, adjournment requests are not routinely granted. Requests for adjournments must be made in writing to the Administrative Law Judge's Office, Hedley Park Place, 433 River Street, 5th Floor, Troy, New York 12180 (518-402-0751), upon notice to the attorney for the Department of Health whose name appears below, and at least five days prior to

the scheduled hearing date. Claims of court engagement will require detailed affidavits of actual engagement. Claims of illness will require medical documentation.

At the conclusion of the hearing, the committee shall make findings of fact, conclusions concerning the charges sustained or dismissed, and, in the event any of the charges are sustained, a determination of the penalty or sanction to be imposed or appropriate action to be taken. Such determination may be reviewed by the administrative review board for professional medical conduct.

THESE PROCEEDINGS MAY RESULT IN A DETERMINATION THAT YOUR LICENSE TO PRACTICE MEDICINE IN NEW YORK STATE BE REVOKED OR SUSPENDED, AND/OR THAT YOU BE FINED OR SUBJECT TO OTHER SANCTIONS SET FORTH IN NEW YORK PUBLIC HEALTH LAW SECTION 230-a. YOU ARE URGED TO OBTAIN AN ATTORNEY TO REPRESENT YOU IN THIS MATTER.

DATED: Albany, New York  
March 16, 1998

  
BARBARA A. DeBUONO, MD, MPH  
Commissioner of Health

Inquiries should be directed to:

William J. Comiskey  
Chief Counsel  
NYS Department of Health  
Division of Legal Affairs  
Corning Tower Building  
Room 2509  
Empire State Plaza  
Albany, New York 12237-0032  
(518) 473-4282

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

-----X

IN THE MATTER

: STATEMENT

OF

: OF

ANA MARIA SANTI, M.D.

: CHARGES

-----X

ANA MARIA SANTI, M.D., the Respondent, was authorized to practice medicine in New York State on August 1, 1972, by the issuance of license number 113491 by the New York State Education Department. Respondent is currently registered with the New York State Education Department to practice medicine from a registered address at 3 Holder Place, Forest Hills, New York 11375.

FACTUAL ALLEGATIONS

A. On or about May 2, 1994, the Respondent Ana Maria Santi, M.D., entered into an Application for Consent Order and order in case BPMC #94-69 in settlement of a pending professional medical conduct investigation. This investigation involved charges and allegations that the Respondent had been dependent on, and a habitual user of alcohol since prior to 1980, with periods of sobriety followed by relapse with alcohol and librium. By virtue of this misconduct, she was charged with committing professional misconduct in that she had been a habitual abuser of alcohol within the meaning of N.Y. Educ. Law §6530(8). BPMC Order #94-69 imposed a penalty suspending Respondent's license to practice medicine in the State of New York for a period of one

, the suspension was stayed, and placing Respondent on probation for a period of five years subject to the terms enumerated in an exhibit attached to the Order. Said Consent Order, Application for Consent Order, Statement of Charges, and Term of Probation are hereto attached and made a part hereof.

A(1) Respondent practiced medicine in violation of the terms and conditions of her probation under BPMC Order #94-69 on the following dates and at the following locations.

a. On or about and between October 1997 and March 9, 1998, at the LaFontaine-Rish Medical Associates Office, 315 West 57th St., New York, New York, including but not limited to providing anesthesia services to Patient A during a procedure which resulted in the death of the patient.

b. On or about and between the fall of 1996 and March 9, 1998, for a company known as "Crown Medical," at 133 East 58th Street, New York, New York.

c. On or about and between May 2, 1994 and March 9, 1998, with Bipin Solanki, M.D., in New York City.

d. On or about and between 1995 and December 1997, with Peter Corines, M.D. in New York City.

B. On or about and between May 13, 1994 and March 9, 1998, Respondent failed to inform the Director of OPMC that she was working as a physician at the locations specified in paragraph A, and failed to provide the Director with written notice of her employment and practice at those locations and during those periods.

(B) (1) Respondent engaged in this conduct knowingly

(B) (1) Respondent engaged in this conduct knowing with intent to deceive the Director.

C. On or about and between May 13, 1994 and March 9, 1998 Respondent made false representations to the Director's staff that she was not practicing medicine. These representations which were knowingly made with intent to deceive, include, but are not limited to, the following:

1. On or about November 18, 1996, in an interview precipitated by a report of a positive screen for the presence of morphine in her urine, Respondent reviewed the terms of her probation with OPMC Medical Director Nathan P. Reed, M.D. and Probation Unit Supervising Investigator Cheryl B. Ratner, and she informed Dr. Reed and Ms. Ratner that she was not engaged in the practice of medicine.
2. In a letter dated July 7, 1995, Respondent advised OPMC Case Coordinator Suzanne L. Ellsworth that she was "aware of the fact that will need a working monitor if I go back to practice. At present time I am not working, if my situation changes I will notify you."
3. In a telephone conversation with Dr. Santi on March 9, 1998, Dr. Santi told Supervising Investigator Cheryl B. Ratner that she was not engaged in the practice of medicine, and that she has "no practice" other than

doing charts and filling in paperwork.

D. On or about and between May 13, 1994 and March 9, Respondent made false representations to representatives of Medical Society of the State of New York, Committee for Physician's Health, that she was not practicing medicine. These representations were knowingly made with intent to de

**SPECIFICATIONS 1, 2, 3, 4, 5, AND 6**  
**VIOLATING PROBATION**

Respondent is charged with professional misconduct under York Education Law Section 6530(29) by reason of her violating any term of probation or condition or limitation imposed on the licensee pursuant to §230 of the Public Health Law, in that Petitioner charges:

1. The facts in Paragraph A and A(1) (a).
2. The facts in Paragraph A and A(1) (b).
3. The facts in Paragraph A and A(1) (c).
4. The facts in Paragraph A and A(1) (d).
5. The facts in Paragraph B.
6. The facts in Paragraph C, C(1), C(2) and C(3), singularly and in combination.

**SEVENTH SPECIFICATION  
PRACTICING FRAUDULENTLY**

Respondent is charged with professional misconduct under York Education Law Section 6530(2) by reason of her practicing the profession fraudulently, in that Petitioner charges:

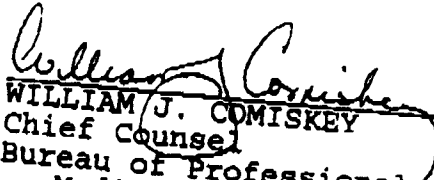
- 7. The facts in Paragraphs B, B(1), C, C(1), C(2), C(3) D, singularly and in combination.

**EIGHTH SPECIFICATION  
CONDUCT EVIDENCING MORAL UNFITNESS**

Respondent is charged with professional misconduct under York Education Law Section 6530(20) by conduct in the practice of medicine evidencing moral unfitnes to practice medicine, in that Petitioner charges:

- 8. The facts in allegations A, B, C and D, and their subparagraphs, singularly and in combination.

DATED: March 16, 1998  
Albany, New York

  
WILLIAM J. COMISKEY  
Chief Counsel  
Bureau of Professional  
Medical Conduct



**EXHIBIT "B"**

4/98

1. I request, agree, and understand that the suspension of my license shall be terminated only upon a showing to the satisfaction of a Committee on Professional Conduct of the State Board for Professional Medical Conduct (henceforth "Committee") that I have successfully complied with or completed a course of therapy and ongoing evaluation, which successful compliance or completion must include a determination by said Committee that I am no longer incapacitated for the active practice of medicine and that I am both morally and professionally fit and clinically competent to practice medicine. I shall provide to the Office of Professional Medical Conduct a proposed treatment plan, for advice as to whether it is generally appropriate, but I understand that the determination of successful compliance with or completion of the course of therapy shall be made solely by the Committee, and shall include, but not be limited to, a determination that I am no longer incapacitated for the active practice of medicine.

2. I request, agree, and understand that upon my request, a meeting of a Committee shall be convened for the purpose of my making the showing referred to in paragraph 1. The Board will make reasonable attempts to convene a Committee not later than 90 days after my request, which shall not be deemed to have been perfected until receipt, by the Director of the Office of Professional Medical Conduct, of all that is required to be provided by me pursuant to the Conditions imposed upon me and pursuant to paragraph 3 below. I understand and agree that the procedural nature of said proceeding shall be determined by the State Board for Professional Medical Conduct through the discretion of the Director of the Office of Professional Medical Conduct upon consultation with Counsel, Bureau of Professional Medical Conduct. I understand and agree that proceedings before said Committee shall *not* be in the nature of a *hearing* pursuant to New York Public Health Law §230, but shall, instead, be informal and intended only for the purpose of addressing any and all facts, evidence, information, circumstances, or issues which do or may relate to the advisability of terminating the suspension of my license. The Committee shall be given access to evidence and information including but not limited to:

- a. Any and all evidence pertaining to Respondent's compliance with the Conditions imposed.
- b. Any and all evidence relating to Respondent's cooperation with Federal, State, and local governmental investigations, litigation, and prosecution, whether administrative, civil, or criminal in nature.
- c. Any evidence which the Director of the Office of Professional Medical Conduct or Counsel, Bureau of Professional Medical Conduct deems appropriate.

3. I request, agree, and understand that at the time that I request that a meeting of a Committee be scheduled, pursuant to paragraph 2, I will provide the Director of the Office of Professional Medical Conduct, New York State Department of Health, 433 River Street, Suite 303, Troy, NY 12180-2299, with the following:

- a. The signed acknowledgement from the supervising physician referred to in paragraph 5c.
- b. The signed acknowledgement from the health care professional referred to in paragraph 5d.
- c. Certified true and complete copies of records of all evaluation and treatment, relating to my impairment, whether that evaluation and treatment occurred prior to or during the time this surrender is in effect. These records shall include documentation of the results of all urine/blood/breath tests conducted to detect the presence of drugs and/or alcohol.
- d. Fully executed waivers of patient confidentiality concerning any previous and prospective treatment records.
- e. An independent current psychiatric evaluation by a board certified psychiatrist. Also, upon request of the Director of OPMC, a current in-depth chemical dependency evaluation by a health care professional in a licensed facility.

- f. A report of a complete clinical competency assessment, performed by a program for such assessment, such program to be proposed by Respondent and subject to the prior written approval of the Director of OPMC.
- g. My attendance at, participation in, and cooperation with any interview or interviews conducted by personnel of OPMC, upon the request of the Director thereof.

Provision of the aforesaid documents does not constitute a showing that I am no longer incapacitated for the active practice of medicine.

4. At the proceeding referred to in paragraph 2, I will provide the committee, at a minimum, with the following:

- a. Certified true and complete records of all psychiatric, psychological, and/or any other mental health treatment, evaluation, and/or testing, whether in an out-patient, in-patient, office, consultation setting.
- b. Evidence of compliance with the terms of a continuing after-care out-patient treatment plan that addresses the major problems associated with my illness.
- c. Evidence that I have maintained adequate knowledge and competence to practice as a physician. Such evidence shall include documentation of continuing medical education and, if so requested by the Director of OPMC, a report of an independent evaluation of my medical knowledge and competence.

Submission of the aforesaid evidence does not constitute a showing that I am no longer incapacitated for the active practice of medicine.

5. I request, agree, and understand that if the Chairperson of the Committee issues an order (Order) finding that I have successfully completed the prescribed course of treatment, thereby terminating the suspension of my license, the Order shall further impose a period of probation, pursuant to New

York Public Health Law §230-a, during which my practice of medicine shall be subject to conditions imposed. My practice shall be subject to such conditions for a period of no less than five years. The minimum conditions will include any Conditions set forth in BPMC Order 94-69, and as follows:

- a. I will comply with the terms of a continuing after-care treatment plan that addresses the major problems associated with my illness.
- b. At the direction of the Director of OPMC, I will submit to periodic interviews with, and evaluations by, a board certified psychiatrist or other licensed mental health practitioner designated by the Director. Said practitioner shall report to the Director regarding my condition and my fitness or incapacity to practice medicine.
- c. I will be supervised in my medical practice by a licensed physician, proposed by me and approved in writing by the Director of OPMC, in accordance with the conditions contained in or annexed to the Order. Said supervising physician shall be familiar with my history of impairment and with the Order and its conditions. Said supervising physician shall supervise my compliance with the conditions of practice imposed by the Order. Said supervising physician shall be in a position regularly to observe and assess my medical practice. Said supervising physician shall acknowledge his/her willingness to comply with the supervision by executing the acknowledgement provided by OPMC. The approval of a practice supervisor as described in this paragraph will remain a condition precedent to my practice of medicine throughout the period of my probation. Any practice of medicine in the absence of an approved practice supervisor is unauthorized and will constitute a violation of the terms of probation and the unauthorized practice of medicine.
  - i. Said supervising physician shall submit to

- OPMC quarterly reports regarding the quality of my medical practice, any unexplained absences from work and certifying my compliance or detailing my failure to comply with each condition imposed.
- ii. Said supervising physician shall report any suspected impairment, inappropriate behavior, questionable medical practices or possible misconduct to OPMC.
- d. I will continue in treatment with a health care professional, proposed by me and approved, in writing, by the Director of OPMC, for as long as the health care professional determines it is necessary.
- i. My treating health care professional or program shall submit to OPMC quarterly reports certifying that I am complying with the treatment.\*
  - ii. Said treating health care professional shall report to OPMC immediately if I am noncompliant with my treatment plan or if I demonstrate any significant pattern of absences.
  - iii. Said treating health care professional shall acknowledge his/her willingness to comply with the above-mentioned reporting by executing the acknowledgement provided by OPMC.

6. I agree that the terms set out in paragraph 5 shall be the minimum probation terms, related to my fitness to practice, to be imposed on my practice upon restoration of my license, and that other reasonable terms may be added by the Committee at the time of license restoration, and that the costs of complying with all such terms will be my responsibility. I understand that any failure by me to comply with the conditions imposed upon my practice at the time of license restoration, may result in disciplinary action being brought against me charging professional misconduct as defined by the New York State Education Law,

including but not limited to N.Y. Educ. Law Section 6530(29) (McKinney Supp. 1998). That section defines professional misconduct to include "violating any... condition... imposed on the licensee pursuant to section two hundred thirty of the public health law."

7. I agree that upon any denial of license restoration made by the Committee, I shall not again request convening of a Committee until a minimum period of twelve months has elapsed since such proceeding commenced.

8. I agree that in addition to the terms set out in paragraph 5 and any other terms imposed by added by the Committee upon restoration of my license, I shall also be subject to the following standard terms of probation:

a. I shall conduct myself in all ways in a manner befitting my professional status, and shall conform fully to the moral and professional standards of conduct and obligations imposed by law and by my profession.

b. I 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.

c. I 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. I shall personally meet with a person designated by the Director of OPMC as requested by the Director.

d. 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].

e. The period of probation shall be tolled during periods in which I am not engaged in the active practice of medicine in New York State. I shall notify the Director of OPMC, in writing, if I am not currently engaged in or intend 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. The tolling provision set forth in this paragraph may be waived by the Director of the OPMC, in the Director's discretion.

f. My professional performance may be reviewed by the Director of OPMC. This review may include, but shall not be limited to, a review of office records, patient records and/or hospital charts, interviews with or periodic visits with me and my staff at practice locations or OPMC offices.

g. I 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.

h. I shall comply with all terms, conditions, restrictions, limitations and penalties to which I am subject pursuant to the Order and I 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 me as may be authorized pursuant to the law.

\*





*Board for Professional Medical Conduct*

Corning Tower • Empire State Plaza • Albany, NY 12237 • (518) 474-8357

Mark R. Chassin, M.D., M.P.P., M.P.H.  
Commissioner

C. Maynard Guest, M.D.  
Executive Secretary

May 6, 1994

**CERTIFIED MAIL - RETURN RECEIPT REQUESTED**

Ana Maria Santi, M.D.  
3 Holder Place  
Forest Hills, New York 11375

RE: License No. 113491

Dear Dr. Santi:

Enclosed please find Order #BPMC 94-69 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect upon receipt of this letter or seven (7) days after the date of this letter, whichever is earlier.

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  
Empire State Plaza  
Tower Building-Room 438  
Albany, New York 12237-0756

Sincerely,

C. Maynard Guest, M.D.  
Executive Secretary  
Board for Professional Medical Conduct

Enclosure

cc: Walter Marcus, Esq.  
Kern, Augustin, Conroy & Shippman  
420 Lakeville Road  
Lake Success, New York 11042

Roy Nemerson, Esq.

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

-----X  
IN THE MATTER :  
OF : ORDER  
ANA MARIA SANTI, M.D. : BPMC #94-69  
-----X

Upon the application of Ana Maria Santi, M.D.  
(Respondent) for Consent Order, which application is made a part  
hereof, it is

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: 2 May 1994

Charles J. Vacanti  
Charles J. Vacanti, M.D.  
Chairperson  
State Board for Professional  
Medical Conduct



I admit guilt to the Specification in full satisfaction of the charges against me.

I hereby agree to the penalty that my license to practice medicine in the State of New York shall be suspended for a period of one year, that said suspension be stayed, and that I shall be placed on probation for a period of five years, subject to the terms enumerated in Exhibit B, attached.

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 am making this Application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner.

Ana Maria Santi M.D.

ANA MARIA SANTI, M.D.  
RESPONDENT

Sworn to before me this  
21<sup>st</sup> day of April, 1994.

Walter Marcus

NOTARY PUBLIC

WALTER R. MARCUS  
Notary Public, State of New York  
No. 24-4658211

Hassan County  
expires 08/31/95

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

-----X  
: APPLICATION  
IN THE MATTER :  
: FOR  
OF :  
: CONSENT  
ANA MARIA SANTI, M.D. :  
: ORDER  
-----X

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

Date: 4 - 21 - 44

*Ana Maria Santi, M.D.*

ANA MARIA SANTI, M.D.  
RESPONDENT

Date: 4/21/44

*Walter Marcus*

WALTER MARCUS, ESQ.  
ATTORNEY FOR RESPONDENT

Date: 4/25/44

*R. Nemerson*

ROY NEMERSON  
DEPUTY COUNSEL  
BUREAU OF PROFESSIONAL  
MEDICAL CONDUCT

Date: May 5, 1994

Kathleen M. Tanner

KATHLEEN M. TANNER  
DIRECTOR  
OFFICE OF PROFESSIONAL  
MEDICAL CONDUCT

Date: 2 May 1994

Charles J. Vacanti

CHARLES J. VACANTI, M.D.  
CHAIRPERSON  
STATE BOARD FOR  
PROFESSIONAL MEDICAL CONDUCT

EXHIBIT A

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

-----X  
IN THE MATTER : STATEMENT  
OF : OF  
ANA MARIA SANTI, M.D. : CHARGES  
-----X

ANA MARIA SANTI, M.D., the Respondent, was authorized to practice medicine in New York State on August 1, 1972 by the issuance of license number 113491 by the New York State Education Department. The Respondent is currently registered with the New York State Education Department to practice medicine for the period January 1, 1993 through December 31, 1994. Respondent's registered address is 3 Holder Place, Forest Hills, New York 11375.

ALLEGATIONS

- A. Respondent has been a dependent, habitual abuser of alcohol since prior to 1980, with periods of sobriety followed by relapse with alcohol and Librium.





EXHIBIT "B"

TERMS OF PROBATION

1. ANA MARIA SANTI, M.D., during the period of probation, shall conduct herself in all ways in a manner befitting her professional status, and shall conform fully to the moral and professional standards of conduct imposed by law and by her profession;
2. That Respondent shall submit written notification to the New York State Department of Health (NYSDOH), addressed to the Director, Office of Professional Medical Conduct, New York State Health Department, Corning Tower Building, 4th Floor, Empire State Plaza Albany, New York 12237 of any employment and practice, of Respondent's residence and telephone number, of any change in Respondent's employment, practice, residence, or telephone number within or without the State of New York;
3. Respondent shall submit written proof from the Division of Professional Licensing Services (DPLS), New York State Education Department (NYSED), that Respondent has paid all registration fees due and owing to the NYSED and Respondent shall cooperate with and submit whatever papers are requested by DPLS in regard to said registration fees, said proof from DPLS to be submitted by Respondent to the New York State Department of Health, addressed to the Director, Office of Professional Medical Conduct, as aforesaid, no later than the first three months of the period of probation;
4. Respondent shall submit written proof to the NYSDOH, addressed to the Director, Office of Professional Medical Conduct, as aforesaid, that 1) Respondent is currently registered with the NYSED, unless Respondent submits written proof that Respondent has advised DPLS, NYSED, that Respondent is not engaging in the practice of Respondent's profession in the State of New York and does not desire to register, and that 2) Respondent has paid any fines which may have previously been imposed upon Respondent by the Board or by the Board of Regents; said proof of the above to be submitted no later than the first two months of the period of probation;
5. Respondent shall comply with all terms, conditions, restrictions, and penalties to which he is subject pursuant to the order of the Board;
6. At all times during the period of probation:
  - a. Respondent shall remain drug and alcohol free.

b. Respondent's sobriety shall be monitored by a health care professional proposed by Respondent but subject to the approval of the Director of the Office of Professional Medical Conduct. Said monitor shall supervise Respondent's compliance with the probationary terms set forth in the Order. Said monitor shall acknowledge his/her willingness to comply with the monitoring by executing an acknowledgement provided by the Office of Professional Medical Conduct.

i. Said monitor shall be familiar with Respondent's history of substance abuse, with the results of any and all neurological and psychiatric evaluations of Respondent, and with the terms of probation contained in or annexed to the Consent Order. Said monitor shall not be Respondent's treating physician.

ii. Said monitor shall see Respondent at least once per month.

iii. Said monitor shall direct Respondent to submit to random, observed, unannounced tests of Respondent's blood, breath, and/or urine for the presence of drugs or alcohol and to evaluate whether she has complied with the requirement set forth in Paragraph 6 (d), below, that she be maintained on a regimen of Antabuse. Any failure to so comply shall be deemed a violation of probation. Respondent shall comply with said direction. The monitor shall report to the Office of Professional Medical Conduct (the Office) within 24 hours if at any time such a test is refused by Respondent or is positive for drugs or alcohol, or negative for Antabuse. During the first six months of the period of probation, such random, observed, unannounced tests shall be conducted with a minimum frequency of three times per week. During the seventh through eighteenth months of the period of probation, such random, observed, unannounced tests shall be conducted with a minimum frequency of twice per week. Thereafter, the minimum frequency of such tests may be reduced, at the discretion of the monitor, but only with advance consent of the Director of the Office of Professional Medical Conduct. At all times said monitor shall have discretion and authority to direct such

tests with greater than the minimum frequency herein specified.

- iv. Said monitor shall report to the Office any noncompliance with the terms of probation.
  - v. Said monitor shall not be a personal friend of Respondent's.
  - vi. Said monitor shall submit to the Office quarterly reports either certifying Respondent's compliance, or detailing Respondent's failure to comply, with each of the terms of probation. The reports shall include the results of all body fluid and/or breath tests for drugs and/or alcohol and/or Antabuse performed during the quarter.
- c. Respondent shall practice medicine only in a supervised setting, approved by the Director of OPMC, and shall be supervised in her medical practice by an on-site licensed physician who is an anesthesiologist and who shall be proposed by Respondent but subject to the approval of the Director of the Office of Professional Medical Conduct. Said supervising physician shall perform weekly chart reviews to assess the level of Respondent's performance. Said supervising physician shall cause Respondent to be tested via breathalyzer immediately prior to each shift worked by Respondent during the first year of the period of probation. Said supervising physician shall be familiar with Respondent's history of substance abuse and with the Consent Order and its terms of probation. Said supervising physician shall be in a position regularly to observe and assess Respondent's medical practice. Said supervising physician shall acknowledge his/her willingness to comply with the supervision by executing an acknowledgement provided by the Office of professional Medical Conduct.
- i. Said supervising physician shall have the authority to direct Respondent to submit to unannounced tests of Respondent's blood, breath, and/or urine for the presence of drugs or alcohol. Respondent shall comply with such direction. The supervising physician shall report to the Office within 24 hours if at any time such a test is refused by Respondent or is positive.
  - ii. Said supervising physician shall submit to the Office quarterly reports regarding the quality of Respondent's medical practice, any unexplained absences from work and certifying Respondent's compliance on

detailing any failure to comply with each term of probation.

- d. Respondent shall continue in treatment with a health care professional or a treatment program for as long as the health care professional or treatment program determines it is necessary. Respondent shall comply with the treatment regimen prescribed by her treating professional(s), and shall further be maintained on a medically appropriate prescribed regimen of Antabuse. By placement of her initials below, Respondent, as part of this application seeking entry of a Consent Order in lieu of a hearing pursuant to Section 230 of the Public Health Law, indicates her willingness and consent to be maintained on a medically appropriate Antabuse regimen.  
(RS).
- i. Respondent's treating health care professional or program shall submit to the Office quarterly reports certifying that Respondent is complying with the treatment.
- ii. Said treating health care professional or program shall report to the Office immediately if the Respondent drops out of treatment.
- iii. Said treating health care professional or program shall report to the Office any significant pattern of absences.
- iv. Said treating health care professional or program shall acknowledge his/her/its willingness to comply with the above-mentioned reporting by executing an acknowledgement provided by the Office of Professional Medical Conduct.
- e. Respondent shall submit to and cooperate with ~~an~~ initial, complete neurological and ~~psychiatric~~ psychiatric evaluation, within 30 days of the effective date of the instant consent order, by a physician approved by the Director of OPMC. Said initial evaluation shall also include a work up of Respondent's elevated TSH (pituitary function) levels. At the discretion of the Director of OPMC Respondent shall submit to, and cooperate with, follow-up neurological and psychiatric evaluations, annually. The results of all said initial and follow-up evaluations shall be reported to Respondent's treating health care professional or program, to the Director of OPMC, and to Respondent's monitor.

7. Any civil penalty not paid by the date prescribed herein shall be subject to all provisions of law relating to debt collection by the State of New York. 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 nonrenewal of permits or licenses (Tax Law section 171(27); State Finance Law Section 18; CPLR section 5001; Executive Law Section 32).
8. So long as there is full compliance with every term herein set forth, Respondent may continue to practice his or her aforementioned profession in accordance with the terms of probation; provided, however, that upon receipt of evidence of noncompliance with, or any violation of these terms, the Director of the Office of Professional Medical Conduct and/or the Board may initiate a violation of probation proceeding and/or such other proceeding against Respondent as may be authorized pursuant to the Public Health Law.