

433 River Street, Suite 303

Troy, New York 12180-2299

Dennis P. Whalen Executive Deputy Commissioner

September 27, 2000

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Eduardo A. Sanchez, M.D. 135 Rockaway Turnpike, Suite 108 Lawrence, New York 11559

Sylvia Porter Finkelstein, Esq. NYS Department of Health 5 Penn Plaza – Suite 601 New York, New York 10001

Robert S. Asher, Esq. 295 Madison Avenue Suite 700 New York, New York 10017

RE: In the Matter of Eduardo A. Sanchez, M.D.

Dear Parties:

Antonia C. Novello, M.D., M.P.H.

Commissioner

Enclosed please find the Determination and Order (No. 00-268) of the Hearing Committee in the above referenced matter. This Determination and Order shall be deemed effective upon the receipt or seven (7) days after mailing by certified mail as per the provisions of §230, subdivision 10, paragraph (h) of the New York State Public Health Law.

As prescribed by the New York State Public Health Law §230, subdivision 10, paragraph (i), 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. 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,

Typone T. Butler, Director Bureau of Adjudication

TTB:cah Enclosure

STATE OF NEW YORK : DEPARTMENT OF STATE BOARD FOR PROFESSIONAL MEDICAL CO	HEALTH NDUCT X	Copy
IN THE MATTER	:	HEARING COMMITTEE
	:	DETERMINATION
EDUARDO A. SANCHEZ, M.D.	:	AND OTHER
	X	BPMC # 00-268

Benjamin Wainfeld, M.D., Chairperson, Ralph Lucariello, M.D. and Ms. Lois Voyticky., duly designated members of the State Board of Professional Medical Conduct, appointed by the Commissioner of Health of the State of New York pursuant to Section 230 (1) of the Public Health Law, served as the Hearing Committee in this matter pursuant to Sections 230 (10) (e) and 230 (12) of the Public Health Law. Stephen Bermas, Esq., Administrative Law Judge, served as Administrative Officer for the Hearing Committee.

After consideration of the entire record, the Hearing Committee submits this Determination and Order.

SUMMARY OF THE PROCEEDINGS

Notice of Hearing dated:

Statement of Charges dated:

Hearing Dates:

Deliberation Date:

Place of Hearing:

Petitioner Appeared By:

Respondent Appeared By:

June 16, 2000

June 12, 2000

June 29, August 11, 14, 17, 28 and 29, 2000

September 11, 2000

NYS Department of Health 5 Penn Plaza New York, New York

Sylvia Porter Finkelstein, Esq. Associate counsel Bureau of Professional Medical Conduct NYS Department of Health

Robert S. Asher, Esq.

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STATEMENT OF CHARGES

The Statement of Charges has been marked as Petitioner's Exhibit 1 and attached hereto as Appendix A.

FINDINGS OF FACT

Numbers in parentheses refer to transcript page numbers or exhibits. These citations represent evidence found persuasive by the Hearing Committee in arriving at a particular finding. Conflicting evidence, if any, was considered and rejected in favor of cited evidence. All Findings are unanimous.

BACKGROUND

- Respondent, EDUARADO A SANCHEZ, M.D., was authorized to practice medicine in the State of New York on or about August 11, 1988 by the issuance of License 175825 by the New York State Education Department. (Ex. 2)
- 2. Dr. Sanchez is currently registered with the New York State Education Department to practice medicine from 135 Rockaway Turnpike, Suite 108, Lawrence, New York 11559. (Ex. 2).
- 3. At all times herein relevant, Dr. Sanchez was a Board Certified Internist, practicing Internal Medicine at the above office address. (T. 550).

PATIENT A

4. On or about March 13, 2000, Patient A, a 30 year old female, was seen by Respondent complaining of nasal congestion, snoring, headache, and sore throat. (T37-38,40).

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- Before being seen by Respondent, Patient A told a female assistant that her symptoms consisted of nasal congestion, throat pain, and her ear was beginning to hurt. (T41-42, 244-245). The female assistant took her history, which included a tubal ligation in 1997. (T42, 44-45, 105-115, 127-129, 130-31).
- Patient A told Respondent that her symptoms consisted of nasal congestion, throat pain, headache, and ear pain. No gown was offered at any time. (T46).
- 7. Respondent instructed Patient A to lie down on the examination table. As Patient A was lying on the examination table, Respondent pulled down her pantihose and panties to her knees, exposing her buttocks. While Patient A was lying face down on the examination table, Respondent placed both hands on the Patient's buttocks and pressed down. Respondent then touched the Patient's buttocks in a circular motion and spread them. (Ex. C, T137-138, 50, 140, 141-144, 146).
- 8. While Respondent was standing on Patient A's left side, next to the examination table, Patient A saw Respondent touching his genital area with one hand, while continuing to touch Patient A's buttocks with his other hand. (T52).

- 9. While standing behind Patient A, Respondent pressed his erect penis against her buttocks and touched Patient A's left inguinal area. (Ex. C, T54, 163-165).
- Respondent directed Patient A to lie on her stomach; after injecting Patient A twice in the inferior lower buttock area, Respondent took Patient A's left hand and pressed it against his groin area. (Ex. C, T55-57, 57-58, 166-168, 169-170).
- 11. After palpating Patient A's throat, Respondent ran his hands over her breasts. (T60, 173-174).
- During the time that Patient A was in the examination room with Respondent, no nurse was present during the physical examination and no employees came in except when the injection was given. (T61-62, 132-133).
- When Patient A came out of the examination room she was nervous, pale and was trembling. (T247-248).
- 14. Patient A testified that she had been treated by other physicians for sinus infections in the past and had never been examined below the chest on those occasions. (T60, 173-174).
- 15. At the end of the visit, Respondent prescribed Elavil and told Patient A that it was for headaches. Patient did not fill the prescription. (Ex. 4, T60-61, 62-63).
- 16. Immediately after the visit, Patient A reported the details of the incident to her sister-in-law, to her brother-in-law and to her husband. (T67-71, 249-254, 744-747, 749-750, 759-760). The next day, Patient A reported the incident to the police. (Ex. C, T75-76, 256-257, 378-79, 482-384, 387-388, 392-394).

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- 17. As a result of these events, Patient A has suffered from depression necessitating psychiatric treatment and continues to suffer residual trauma. (T83-85, 258-259).
- 18. The medical record maintained by Respondent for Patient A fails to accurately reflect the evaluation and actual physical examination performed by Respondent on Patient A. (Ex. 3, T716). Patient A denied that she was asked some of the questions which are reflected in the medical record. (T127-129).

PATIENT B

- Respondent treated Patient B at his office located at 135 Rockway Turnpike, Suite 108, Lawrence, New York 11559, from in or about May 1996 through on or about January 26, 1999. (Ex. 5, T290-292).
- 20. On or about January 26, 1999, Patient B, a 50 year old female, was seen by Respondent complaining of flu, chest pain, backache and cough for six days. (Ex. 5, 5A, T294-295, 296, 329). Respondent examined Patient B's back with a stethoscope (T298-299). Respondent directed Patient B to stand facing the door with her hands at head level placed on the door and her legs apart. (T299-300, 301-302). Respondent told Patient B to unbutton her pants. He then pulled down her pants and underwear (T301, 333-336). While Patient B remained with her hands on the door, her legs spread apart and her buttocks exposed, Respondent stood behind Patient B and touched her left inguinal area with his left hand and her buttocks with his right hand. Respondent pressed his groin area against her buttocks (T303-304, 313-314).
- 21. Respondent then directed Patient B to lie down on the examination table. Respondent again pulled down her pants and touched her suprapubic area. (T303-304, 337).

- 22. Respondent then directed Patient B to lie face down on the examination table. He pulled her pants down again and squeezed and rubbed Patient B's buttocks. (T305).
- 23. Immediately following the visit, Patient B reported these events to her daughter-in-law (T311), and the next day reported it to the police. (Ex. 9A, 9B, T315-317, 606-609, 612-616).
- 24. During the time that Patient B was in the examination room with Respondent, no nurse was present during the physical examination and no other employees came in except when the injection was given. (T339).
- 25. The medical record maintained by Respondent for Patient B does not accurately reflect the evaluation and actual physical examination performed by Respondent on Patient B. Patient B denied ever undergoing a rectal exam by Respondent (T326-327) and denied having any urinary complaints on the date of the incident (357-358). In fact, no urinalysis was done. Patient B denied receiving a letter to be absent from work on the date of the incident (T340-343, 349).
- 26. Dr. Sheldon Alter detailed what an appropriate physical examination should have consisted of in order to explore the symptoms presented by Patient B. (Ex. 5, 5A, T658-660, 661, 696-701, 708-709). Dr. Alter testified that Respondent's touching Patient B, as described by the Patient, was grossly inappropriate and not in the Patient's best interests. (T675-6, 680).
- 27. Dr. Sheldon Alter's testimony with regard to the alteration of the medical records in this case was credible and we find that these records were altered. (T662).

CREDIBILITY

- 28. The Petitioner presented the expert testimony of Sheldon Alter, M.D., a board certified internist with an active private practice in the metropolitan area. The Committee finds that Dr. Alter's testimony confirmed generally accepted standards of care in the profession and was supported by the totality of the evidence.
- 29. Patient A's recounting of events was consistent and corroborated by other evidence (police report and testimony of her husband, her sister-in-law and Detective Barrio). Her testimony was unequivocal and remained so during detailed direct and cross-examination. She was relatively calm with reactions that appeared to be appropriate to the situation. Her physical and emotional reactions immediately following the events in question, were detailed by her husband, her sister-in-law, and Detective Barrio. Her emotional reactions following the incident were consistent with the events recounted. The Committee finds Patient A to be credible.
- 30. Patient B also testified before the Committee. Her recounting of the events was supported by other evidence (the police report and the testimony of Officer Alvarez). The testimony of Patient B remained consistent during detailed direct and cross-examination. The Committee finds Patient B to be credible.
- 31. Despite the fact that Patients A and B did not repeat their respective stories with the exact same details each time, the Committee found both to be credible witnesses.
- 32. The Committee found Respondent's testimony to be unpersuasive. Many of his answers were contradictory, inconsistent (compare T865 and 922) and unsupported by the evidence presented. Many of his answers were unresponsive and evasive. (956-960, 974-975-980). The Committee

questions the timing of certain entries made in the medical records which appear to have been made subsequent to the Respondent becoming aware of the Patient's allegations. (T875-880, 882-900, 910-911). Respondent recounted details regarding the visits of each of the Patients that are often not supported by his own medical record. (964-966).

CONCLUSIONS OF LAW

FIRST: Respondent is found to have engaged in professional misconduct by reason of wilfully harassing, abusing or intimidating a Patient either physically or verbally within the meaning of N.Y. Education Law Section 6530 (31) (McKinney Supp. 2000) as set forth in Findings of Fact 4 through 26, supra.

SECOND: Respondent is found to have engaged in professional misconduct by reason of engaging in conduct in the practice of medicine that evidences moral unfitness to practice within the meaning of N.Y. Education Law Section 6530 (20) as alleged in the THIRD and FOURTH Specifications of the Statement of Charges, and as set forth in Findings of Fact 4 through 27, supra.

THIRD: Respondent is not found to have engaged in professional misconduct by reason of engaging in conduct in the practice of medicine that evidences moral unfitness to practice within the meaning of N.Y. Education Law Section 6530 (20) (McKinney Supp.) as alleged in the FIFTH Specification of the Statement of Charges.

FOURTH: Respondent is not found to have engaged in professional misconduct by reason of practicing the profession of medicine fraudulently within the meaning of N.Y. Education Law Section 6530 (2) (McKinney Supp.) as alleged in the Statement of Charges.

FIFTH: Respondent is not found to have engaged in professional misconduct by reason of practicing the profession of medicine with gross negligence within the meaning of N.Y. Education Law Section 6530 (4) (McKinney Supp.) as alleged in the Statement of Charges.

SIXTH: Respondent is not found to have engaged in professional misconduct by reason of practicing the profession of medicine with negligence on more than one occasion within the meaning of N.Y. Education Law Section 6530 (3) (McKinney Supp.) as alleged in the Statement of Charges.

SEVENTH: Respondent is found to have engaged in professional misconduct by failing to maintain a record for each patient which accurately reflects the care and treatment of the patient within the meaning of N.Y. Education Law Section 6530 (32) (McKinney Supp.) as set forth in Findings of Fact 18, 25 and 27, supra.

<u>ORDER</u>

- I. The Hearing Committee determines and orders that Respondent's license to practice medicine be suspended for one year commencing from the date of the service of this Order on said Respondent, but that the suspension shall be stayed commencing thirty (30) days from said date of service of this Order.
- II. The Hearing Committee further determines that:
 - A. Respondent shall, in the course of practicing medicine in New York State, examine and/treat any female patient only in the presence of a chaperone. The chaperone shall be a female licensed or registered health care professional or other health care worker, shall not be a family member, personal friend, or be in a professional relationship with

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Respondent which could pose a conflict with the chaperone's responsibilities. The chaperone shall be proposed by Respondent and subject to the written approval of the Director of OPMC.

- B. Prior to the approval of any individual as chaperone, Respondent shall cause the proposed chaperone to execute and submit to the Director of the Office of Professional Medical
 Conduct (OPMC) an acknowledgment of her agreement to undertake all of the responsibilities of the role of chaperone. Said acknowledgement shall be made upon a form provided by and acceptable to the Director. Respondent shall provide the chaperone with a copy of the Order and all of its attachments and shall, without fail, cause the approved chaperone to:
 - 1. Report quarterly to OPMC regarding her chaperoning of Respondent's practice.
 - 2. Report within 24 hours any failure of Respondent to comply with the Order, including, but not limited to, any failure by Respondent to have the chaperone present when required, any sexually suggestive or otherwise inappropriate comments by Respondent to any patient, and any actions of a sexual nature by Respondent in the presence of any patient.
 - 3. Confirm the chaperone's presence at each and every examination and treatment of a female patient by Respondent, by placing her name, title and date in the patient record for each and every visit, and by maintaining a separate log, kept in her own possession, listing the patient name and date of visit for each and every patient visit chaperoned.

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- 4. Provide copies of the log described in paragraph 3, above, to OPMC at least quarterly and also immediately upon the Director's request.
- C. All cost of the chaperone shall be borne by the Respondent.
- III. The Hearing Committee further orders that Respondent shall provide appropriate gowns to all of his female patients.
- IV. The Hearing Committee further determines and orders that Respondent shall be subject to periodic medical record reviews by the OPMC.
- V. The Hearing Committee further determines and orders that Respondent shall be on probation for a period of five (5) years commencing from the date of the service of this Order on Respondent during which time his compliance with the terms of this Order shall be reviewed periodically by the OPMC.

Dated New York, NY September 13, 2000

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Benjamin Whinfeld, M.D Chairperson

Ralph Lucariello, M.D. Ms. Lois Voyticky

NEW YORK STATE DEPARTMENT OF HEALTI STATE BOARD FOR PROFESSIONAL MEDICAL CONDUC	H CT
IN THE MATTER	COMMISSIONER'S
OF	ORDER AND
EDUARDO A. SANCHEZ, M.D.	NOTICE OF
	HEARING
TO: EDUARDO A. SANCHEZ, M.D. 135 Rockaway Turnpike, Suite 108 Lawrence, NY 11358 11559	Inland

The undersigned, Antonia C. Novello, M.D., M.P.H., Dr P.H., Commissioner of Health, after an investigation, upon the recommendation of a Committee on Profession 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 : continued practice of medicine in the State of New York by Eduardo A. Sanchez, M.E. the Respondent, constitutes an imminent danger to the health of the people of this sta

It is therefore:

ORDERED, pursuant to N.Y. Pub. Health Law §230(12) (McKinney Supp. 2000 that effective immediately Eduardo A. Sanchez, M.D., Respondent, shall not practice medicine in the State of New York. This Order shall remain in effect unless modified vacated by the Commissioner of Health pursuant to N.Y. Pub. Health Law §230(12) (McKinney Supp. 2000).

PLEASE TAKE NOTICE that a hearing will be held pursuant to the provisions o N.Y. Pub. Health Law §230 (McKinney 1990 and Supp. 2000), and N.Y. State Admin. Proc. Act §§301-307 and 401 (McKinney 1984 and Supp. 2000). The hearing will be conducted before a committee on professional conduct of the State Board for Professional Medical Conduct on June 29th, 2000, at 10:00 a.m., at the offices of the New York State Health Department, 5 Penn Plaza, Sixth Floor, New York, NY 10001, *i* 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 v be made and the witnesses at the hearing will be sworn and examined. The Respor shall appear in person at the hearing and may be represented by counsel. The Respondent has the right to produce witnesses and evidence on his behalf, to issue have subpoenas issued on his behalf for the production of witnesses and documents to cross-examine witnesses and examine evidence produced against him. A summa the Department of Health Hearing Rules is enclosed. Pursuant to §301(5) of the Stat Administrative Procedure Act, the Department, upon reasonable notice, will provide a 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 writin to the New York State Department of Health, Division of Legal Affairs, Bureau of Adjudication, Hedley Park Place, 433 River Street, Fifth Floor South, Troy, NY 12180, ATTENTION: HON. TYRONE BUTLER, DIRECTOR, BUREAU OF ADJUDICATION, by telephone (518-402-0748), 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. Clai 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 th 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 §230-a (McKinney Supp. 2000). YOU ARE URGED TO OBTAIN AN ATTORNEY TO REPRESENT YOU IN THIS MATTER.

DATED:

Albany, New York June / 6 ,2000

DENNIS P. WHALEN Executive Deputy Commissioner New York State Health Department

Inquiries should be directed to:

Silvia Pastor Finkelstein Associate Counsel N.Y.S. Department of Health Division of Legal Affairs 5 Penn Plaza Suite 601 New York, New York 10001 (212) - 268-6774

SECURITY NOTICE TO THE LICENSEE

The proceeding will be held in a secure building with restricted access. Only individuals who names are on a list of authorized visitors for the day will be admitted to the building

No individual's name will be placed on the list of authorized visitors unless written notice of th individual's name is provided by the licensee or the licensee's attorney to one of the Departme offices listed below.

The written notice may be sent via facsimile transmission, or any form of mail, but must be received by the Department no less than two days prior to the date of the proceeding. The notice must be on the letterhead of the licensee or the licensee's attorney, must be signed by the licensee or the licensee's attorney, and must include the following information:

Licensee's Name	Date of Proceeding
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Name of person to be admitted_

Status of person to be admitted (Licensee, Attorney, Member of Law Firm, Witness, etc.)

Signature (of licensee or licensee's attorney)

This written notice must be sent to either:

New York State Health Department Bureau of Adjudication Hedley Park Place 433 River Street, Fifth Floor South Troy, NY 12180 Fax: 518-402-0751

New York State Health Department Bureau of Professional Medical Conduct 5 Penn Plaza New York, NY 10001 Fax: 212-268-6735

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

IN THE MATTER

OF

EDUARDO A. SANCHEZ, M.D.

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STATEMENT OF CHARGES

EDUARDO A. SANCHEZ, M.D., the Respondent, was authorized to practice medicine in New York State on or about August 11, 1988, by the issuance of license numi-175825 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. At all times herein mentioned, Respondent was an internist with offices located at 135 Rockway Turnpike, Suite 108, Lawrence, New York 11559. Respondent treate Patient A on March 13, 2000.
 - On or about March 13, 2000, Patient A, a 30 year old female, was seen by Respondent complaining of nasal stuffiness, snoring, and sore throat. In the course of purportedly performing a physical examination, but not for a legitimate medical purpose, Respondent engaged in conduct as follows:
 - As Patient A was laying on the examination table, Respondent pulled down her pantihose and panties to her knees. Respondent then touched her lower back and rubbed both of her buttocks with his hands.

- Respondent rubbed his groin with one hand, while continuing to touch Patient A's buttocks with his other hand.
- c. Respondent then barricaded the door to the examination room with a chair and directed Patient A to lay on her side. While standing behind Patient A, Respondent pressed his erect penis against her buttocks.
- d. Respondent directed Patient A to lay on her stomach; after giving Patient A two injections, Respondent took her hand and placed it on his groin area against his erect penis.
- 2. Respondent failed to maintain a medical record for Patient A which fairly and accurately reflects the evaluation and/or treatment rendered to her.
- Respondent treated Patient B at his office located at 135 Rockway Turnpike, Suite 108, Lawrence, New York 11559, from in or about May 1996 through on or about January 26, 1999.
 - On or about January 26, 1999, Patient B, a 50 year old female, was seen by Respondent complaining of chest pain and cough for six days. In the course of purportedly performing a physical examination, but not for a legitimate medical purpose, Respondent engaged in conduct as follows:
 - a. Respondent directed Patient B to stand up facing the wall, with her hands against the wall and to unbutton her

pants. He then pulled down her pants and underwear. While standing behind Patient B, Respondent touched her groin and pubic area with one hand, while placing a stethoscope on her back with the other hand and leaning his groin area against her buttocks.

- b. Respondent then directed Patient B to lay down on the examination table. Respondent again pulled down her pants and touched her groing area.
- c. Respondent then directed Patient B to lay face down on the examination table. Respondent squeezed and rubbed Patient B's buttocks.
- 2. Respondent failed to maintain a medical record for Patient B which fairly and accurately reflects the evaluation and/or treatment rendered to her.
- C. On or about March 12, 1999, Respondent was arrested and subsequently charged with Sexual Abuse in the Third Degree, a class B misdemeanor. in violation of Sec. 130.55 of the Penal Law, in District Court, Index No. 175825, Nassau County, based on the facts set forth in paragraphs B, B.1, B.1.a, B.1.b, and B.1.c, above.
 - On or about November 24, 1999, while the matter was still pending in District Court, Respondent filed his New York license registration renewal. In response to question 2.a "Have you been convicted or charged with any crime (felony or misdemeanor) in any state or county, the disposition of which was other than acquital or dismissal? Respondent knowingly and with intent to deceive, falsely answered: "No".

SPECIFICATION OF CHARGES

FIRST THROUGH SECOND SPECIFICATIONS WILLFULLY HARASSING, ABUSING OR INTIMIDATING A PATIENT EITHER PHYSICALLY OR VERBALLY

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(31)(McKinney Supp. 2000) by willfully harassing, abusing or intimidating patient either physically or verbally, as alleged in the facts of:

1. Paragraph A, A.1, A.1.a, A.1.b, A.2.c and/or A.1.d.

2. Paragraph B, B.1.a, B.1.b, and/or B.1.c.

THIRD THROUGH FIFTH SPECIFICATIONS MORAL UNFITNESS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(20)(McKinney Supp. 2000) by engaging in conduct in the practice of the profession of medicine that evidences moral unfitness to practice as alleged in the facts of the following:

3. Paragraph A, A.1, A.1.a, A.1.b, A.1.c and/or A.1.d.

4. Paragraph B, B.1.a, B.1.b, and/or B.1.c.

5. Paragraph C and C.1.

SIXTH THROUGH EIGHTH SPECIFICATIONS <u>FRAUDULENT PRACTICE</u>

Respondent is charged with committing professional misconduct as defined by N.N. Educ. Law §6530(2)(McKinney Supp. 2000) by practicing the profession of medicine fraudulently as alleged in the facts of the following:

- 6. Paragraph A, A.1, A.1.a, A.1.b, A.1.c and/or A.1.d.
- 7. Paragraph B, B.1.a, B.1.b, and/or B.1.c.
- 8. Paragraph C and C.1.

NINTH TROUGH TENTH SPECIFICATIONS GROSS NEGLIGENCE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(4)(McKinney Supp. 2000) by practicing the profession of medicine with gross negligence as alleged in the facts of the following:

9. Paragraph A, A.1, A.1.a, A.1.b, A.1.c and/or A.1.d.

10. Paragraph B, B.1.a, B.1.b, and/or B.1.c.

ELEVENTH SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.⁵ Educ. Law §6530(3)(McKinney Supp. 2000) by practicing the profession of medicine with negligence on more than one occasion as alleged in the facts of two or more of the following:

11. Paragraph A, A.1, A.1.a, A.1.b, A.1.c, A.1.d., B, B.1.a, B.1.b, and/or B.1.c.

TWELVETH AND THIRTEENTH SPECIFICATIONS FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y Educ. Law §6530(32)(McKinney Supp. 2000) by failing to maintain a record for each patie which accurately reflects the care and treatment of the patient, as alleged in the facts of:

- 12. A and A.2
- 13. B and B.2.

DATED:

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June 12, 2000 Albany, New York

BRIAN M. MURPHY Chief Counsel Bureau of Professional Medical Conduct

IDAVIT OF

4. A description of the person so served is as follows:

Approx. age: <u>47</u>; Approx. weight: <u>200</u>; Approx. height: <u>510</u>; Sex: <u>M</u>; Skin color: <u>640</u>; Hair color: <u>Braun</u>;

Other identifying characteristics:

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Sworn to before me on this <u>20th</u>day of <u>June</u>, <u>m</u> 2000

SILVIA PASTOR PHODLETEN Notary Public, State of New York No. 4791987 Chalified in Nationa County Commission Expires December 51, 2 (0)

NOTARY PI