

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

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

August 15, 1990

Apolinario Torno, Physician Sunmount Developmental Center Tupper Lake, N.Y. 12986

Re: License No. 112276

Dear Dr. Torno:

Enclosed please find Commissioner's Order No. 11073. This Order and any penalty contained therein goes into effect five (5) days after the date of this letter.

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

Very truly yours,

DANIEL J. KELLEHER Director of Investigations By:

MOIRA A. DORAN

Supervisor

DJK/MAH/er Enclosures

CERTIFIED MAIL- RRR

cc: John J. Kelley, Esq.
31 Main Street
P.O. Box 129
Geneseo, N.Y. 14454-0129

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Office of Processional

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

APPLICATION

IN THE MATTER

: FOR

OF

CONSENT

APCLINARIO TORNO, M.D.

ORDER

STATE OF NEW YORK )
ss.:
CCUNTY OF )

APOLINARIO TORNO, M.D., being duly sworn, deposes and says:

That on or about June 1, 1972 I was licensed to practice as a physician in the State of New York, having been issued License No. 112276 by the New York State Education Department.

I am currently registered with the New York State Education Department to practice as a physician in the State of New York for the period January 1, 1989 through December 31, 1991

I understand that the New York State Board of 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 and Second Specifications of the Statement of Charges.

#### APOLINARIO TORNO, M.D.

I hereby agree to the penalty that my license to practice as a physician in the State of New York be suspended, for a period of four years, that execution of said suspension be stayed, and that I be placed on probation for a period of four years under the terms set forth in the exhibit annexed hereto, made a part hereof, and marked as Exhibit "B".

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

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

I agree that, in the event the Board of Regents grants my application, as set forth herein, an order of the Commissioner of Education may be issued in accordance with same.

#### APOLINARIO TORNO, M.D.

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

APOLINARIO TORNO, M.D.

Respondent

Sworn to before me this go 39th day of January , 1988.

NOTARY PUBLIC

BETH A. SMITH

Notary Public, State of New Yor**®**Franklin County Registration No. 4804183

My Commission Expires 7 − 3 /- 9 €

STATE OF NEW YORK : DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT	
	: APPLICATION
IN THE MATTER	: FOR
OF	: CONSENT
APOLINARIO TORNO, M.D.	: ORDER
The undersigned agree to the above statement proposed penalty based on the terms and conditions	
Date:  Colm C. Journa APOLYNARIO TORNO, M.I Respondent	) D.
Date:  J. MICHAEL JONES, Es Attorney for Respond	
Date: 5 6 90 MEMBER, State Board Professional Medic	for al Conduct
Date: 5 14 90 Cairla—  KATHLEEN M. TANNER  Director, Office of  Medical Conduct	Professional

APOLINARIO TORNO, M.D.

The undersigned has reviewed and agrees to the attached application for consent order.

Date:

DAVID AXELROD, M.D.

Commissioner of Health

The undersigned, a member of the Board of Regents who has been designated by the Chairman of the Regents Committee on Professional Discipline to review this Application for a Consent Order, has reviewed said application and recommends to the Board of Regents that the application be granted.

Date: 1 - 15, 1990

MEMBER OF THE BOARD OF REGENTS

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

IN THE MATTER

STATEMENT

OF

OF

APOLINARIO TORNO, M.D.

CHARGES

APOLINARIO TORNO, M.D., hereinafter referred to as the Respondent, was authorized to engage in the practice of medicine in the State of New York on June 1, 1972 by the issuance of License Number 112276 by the State Education Department. The Respondent is currently registered with the New York State Education Department to practice medicine for the period January 1, 1986 through December 31, 1988 from 3470 East Lake Road, Livonia, New York 14487.

#### FACTUAL ALLEGATIONS

- A. Respondent was treated at Anchor Hospital, 5454

  Yorktowne Drive, College Park, Georgia 30349 from March 15,

  1988 to April 12, 1988 for opiate dependence and alcohol abuse.
- B. Respondent was treated at Bry-Lin Hospital, Buffalo, New York from on or about July 18, 1981 to July 29, 1981 and from on or about June 23, 1982 to July 1, 1982 for mental depression and drug abuse.

Exhibit A

- C. Respondent was treated for substance abuse at the Caron Foundation, Warnersville, Pennsylvania from on or about October 15, 1980 to October 20, 1980.
- D. Since approximately 1978 the Respondent has been a habitual user of drugs and alcohol. Such drugs include Secobarbital, benzodiazepines, diazepam, chlordiazepoxide, amitriptyline, phenothiazine, thioidazine, meprobamate and propoxyphene.
- E. Respondent has actively practiced medicine from 1978 to the present.

#### SPECIFICATION OF CHARGES

#### FIRST SPECIFICATION

Respondent is charged with professional misconduct by reason of being habitually drunk or being dependent on or a habitual user of narcotics, barbiturates, amphetamines, hallucinogens, or other drugs habing similar effects, within the meaning of N.Y. Educ. Law §6509(4) (McKinney 1988), in that, Petitioner charges:

1. The facts in paragraphs A, B, C and D.

#### SECOND SPECIFICATION

Respondent is charged with professional misconduct by reason of practicing the profession while his ability to practice was impaired by alcohol, drugs, physical disability or mental disability, within the meaning of N.Y. Educ. Law §6509(3) (McKinney 1988), in that, Petitioner charges:

2. The facts in paragraphs A, B, C, D and E.

DATED: Albany, New York

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

#### EXHIBIT B

#### TERMS OF PROBATION

#### APOLINARIO TORNO, M.D.

- Respondent, during the period of probation, shall conduct himself in all ways in a manner befitting his professional status, and shall comply fully with all Federal, State and local law, rules and/or regulations regarding the practice of medicine;
- 2. Respondent shall submit written notification to the New York State Department of Health (NYSDOH), addressed to the Director of the Office of Professional Medical Conduct, Empire State Plaza, Corning Tower Building, Room 438, Albany, New York 12237 of his current employment, practice, residence and telephone number and of any change in his employment, practice, residence, or telephone number within or without the State of New York.
- 3. Respondent shall submit to random supervised urine and/or blood screenings for drugs and/or alcohol at the request and discretion of a monitor selected by Respondent and previously approved in writing by NYSDOH, and authorize in writing and cause the monitor to submit in writing to NYSDOH, addressed as aforesaid, the results of said screenings, and to notify NYSDOH immediately of a refusal to take a test or of a positive result;
- 4. Respondent shall cooperate with the regular monitoring and supervision of his practice of medicine by a physician licensed to practice in the State of New York, chosen by Respondent and previously approved in writing by the NYSDOH. Such supervision and monitoring may include, at the monitor's discretion, unannounced review of Respondent's patient records, unannounced actual observation of Respondent's treatment of patients, interviews of Respondent, and any other reasonable means of monitoring or supervising which the monitor deems warranted. The monitoring of Respondent's practice may also include unannounced review of Respondent's ordering, administering, dispensing and inventory of all controlled substances;
- 5. Respondent shall authorize the physician supervising and monitoring his practice of medicine in writing and cause the monitor to submit to NYSDOH, addressed as aforesaid, written quarterly reports regarding Respondent's practice of medicine, and to report immediately any adverse change in his physical and mental condition or ability to practice medicine;
- 6. Respondent shall attend regular counseling group meetings conducted by the Medical Society of the State of New York under the supervision of the monitor designated pursuant to

paragraph three above. Respondent shall authorize the monitor in writing and cause him to submit written certification of attendance at these meetings on a quarterly basis to NYSDOH, addressed as aforesaid.

- 7. Respondent shall authorize the monitor designated pursuant to paragraph three above and cause him to submit to NYSDOH, addressed as aforesaid, written quarterly reports regarding Respondent's physical and mental condition, and to report any adverse change in his physical and mental condition to NYSDOH immediately.
- 8. During the period of probation, Respondent shall abstain from the use of any and all drugs, except as prescribed by a physician for a legitimate medical purpose and shall abstain from the use of alcohol;
- 9. The authorizations required by these terms of probation shall be submitted by Respondent to NYSDOH, addressed as aforesaid, within the first thirty days of the period of probation;
- 10. In the event Respondent fails to comply with any term or condition of probation, Respondent shall be subject to disciplinary action and/or a violation of probation proceeding. If the Board of Regents determines that Respondent has violated any term or condition of probation, they may impose any penalty authorized pursuant to N.Y. Education Law §6511.

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

APOLINARIO TORNO

CALENDAR NO. 11073



# The University of the State of New York.

IN THE MATTER

OF

## APOLINARIO TORNO (Physician)

DUPLICATE
ORIGINAL
VOTE AND ORDER
\_\_\_\_\_NO. 11073

Upon the application of APOLINARIO TORNO, under Calendar No. 11073, which application is made a part hereof, and in accordance with the provisions of Title VIII of the Education Law, it was

<u>VOTED</u> (July 27, 1990): That the application of APOLINARIO TORNO, respondent, for a consent order be granted; and that the Commissioner of Education be empowered to execute, for and on behalf of the Board of Regents, all orders necessary to carry out the provisions of this vote;

#### and it is

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

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

#### APOLINARIO TORNO (11073)

IN WITNESS WHEREOF, I, Thomas Sobol, Commissioner of Education of the State of New York, for and on behalf of the State Education Department and the Board of Regents, do hereunto set my hand and affix the seal of the State Education Department, at the City of Albany, this GHA day of Comment, 1990.

Commissioner of Education