



New York State Board for Professional Medical Conduct

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

Antonia C. Novello, M.D., M.P.H., Dr. P.H.
*Commissioner
NYS Department of Health*

Dennis P. Whalen
*Executive Deputy Commissioner
NYS Department of Health*

Dennis J. Graziano, Director
Office of Professional Medical Conduct

Public

Kendrick A. Sears, M.D.
Chair

Michael A. Gonzalez, R.P.A.
Vice Chair

Ansel R. Marks, M.D., J.D.
Executive Secretary

November 29, 2006

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Carmelo Villa, M.D.
1006 Bridgemill Avenue
Canton, GA 30114

Re: License No. 125346

Dear Dr. Villa:

Enclosed is a copy of Modification Order #BPMC 01-261 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect December 6, 2006.

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

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

IN THE MATTER
OF
CARMELO VILLA, M.D.

MODIFICATION
ORDER

BPMC No. 01-261

Upon the proposed Application for a Modification Order of **CARMELO VILLA, M.D.**,
(Respondent) for Consent Order, that is made a part of this Modification Order, it is agreed to and
ORDERED, that the attached Application, and its terms, are adopted SO ORDERED, and
it is further

ORDERED, that this Modification Order shall be effective upon issuance by the Board,
either by mailing of a copy of this Modification Order, by either first class mail, to Respondent at
the address in the attached Application or certified mail to Respondent's attorney, or upon
transmission via facsimile to Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 12-29-06



KENDRICK A. SEARS, M.D.
Chair
State Board for Professional
Medical Conduct

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

IN THE MATTER
OF
CARMELO VILLA, M.D.

APPLICATION TO
MODIFY CONSENT ORDER
BMPC No. 01-261

CARMELO VILLA, M.D., (Respondent) deposes and says:

That on or about September 15, 1975, I was licensed to practice as a physician in the State of New York, having been issued License No. 125346 by the New York State Education Department.

My current address is 1006 Bridgemill Avenue, Canton, GA 30114.

I am currently subject to CONSENT ORDER BMPC No. 01-261, dated November 3, 2001, annexed hereto, made a part hereof, and marked as Exhibit I (hereinafter "Original Order"), that was issued upon a Consent Agreement and Order signed by me on June 14, 2001, (hereinafter "June 14, 2001, Agreement"), adopted by the Original Order.

I apply, hereby, to the State Board for Professional Medical Conduct for a Modification Order (hereinafter "Modification Order"), modifying the Original Order, as follows: to delete the language in the Original Order that states:

- "1. My license to practice medicine shall be limited as follows:
I will examine and/or treat any female patient only in the presence of a chaperone, as set forth in Exhibit B."
- "2. I will complete one-hundred hours of Category I Continuing Medical Education (CME). Said CME shall address the issues of appropriate and/or sensitive examination of female patients. Any CME which I propose to take in satisfaction of this requirement is subject to the prior written approval of the Office of Professional Medical Conduct (OPMC), and must be submitted for said approval at least 30 days in advance of the course date. If Respondent, despite diligent effort, cannot locate any CME course in the required subject matter, he may, subject to prior written approval of OPMC, take CME courses in other subject matter, including the following areas, to satisfy the requirement: medical ethics,

communication/interaction with patients, and maintaining adequate medical records. All CME taken in satisfaction of this Order must be complete within one year of the effective date of this Consent Order.”

“ That except during periods of actual suspension, Respondent shall maintain active registration of Respondent’s license with the New York State Education Department Division of Professional Licensing Services, and pay all registration fees. This condition shall be in effect beginning thirty days after the effective date of the Consent Order and will continue so long as licensee possesses his/her license; and”

substituting therefore:

“I shall never activate my registration to practice medicine in New York state or seek to reapply for a license to practice medicine in New York state.”

The Modification Order to be issued will not constitute a new disciplinary action against me, but will substitute the proposed language for the above described language in the Original Order.

I make this Application of my own free will and accord and not under duress, compulsion or restraint, and seek the anticipated benefit of the requested Modification. In consideration of the value to me of the acceptance by the Board of this Application, I knowingly waive my right to contest the Original Order or the Modification Order for which I apply, whether administratively or judicially, and ask that the Board grant this Application.

I understand and agree that the attorney for the Department, the Director of the Office of Professional Medical Conduct, and the Chair of the State Board for Professional Medical Conduct each retain complete discretion either to enter into the proposed Agreement and Order, based upon my application, or to decline to do so. I further understand and agree that no prior or separate written or oral communication can limit that discretion.

AFFIRMED:

DATED: 16 Nov 2006



CARMELO VILLA, M.D.
Respondent

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

DATE:

17 November 2006


ROBERT BOGAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE:

27 November 2006


DENNIS J. GRAZIANO
Director
Office of Professional Medical Conduct



New York State Board for Professional Medical Conduct

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Antonia C. Novello, M.D., M.P.H., Dr. P.H.
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Office of Professional Medical Conduct

William P. Dillon, M.D.
Chair

Denise M. Bolan, R.P.A.
Vice Chair

Ansel R. Marks, M.D., J.D.
Executive Secretary

November 5, 2001

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Carmelo Villa, M.D.
1006 Bridgemill Avenue
Canton, GA 30114

RE: License No. 125346

Dear Dt. Villa:

Enclosed please find Order #BPMC 01-261 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect November 5, 2001.

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 to 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: Justin O. C. Corcoran Esq.
O'Connor, O'Connor, Maybrger and First, P.C.
20 Corporate Woods Blvd.
Albany, NY 12211

Cindy M. Fascia, Esq.

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

IN THE MATTER

OF

CARMELO VILLA, M.D.

CONSENT
AGREEMENT
AND
ORDER

BPMC No. 01-261

CARMELO VILLA, M.D., (Respondent) says:

That on or about September 15, 1975, I was licensed to practice as a physician in the State of New York, having been issued License No. 125346 by the New York State Education Department.

My current address is ~~14B Candlelight Court, Clifton Park, NY 12065~~ *1006 BRIDGEMILL AVE, CANTON, GA 30114*, 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 six 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 the Fifth and Sixth Specifications of the Statement of Charges, with regard to the Factual Allegations contained in Paragraphs A, A.3, B, B.1, and B.2 only. I also admit to the Factual Allegations in Paragraph C. I make these admissions in full satisfaction of the charges against me. I do not admit the Factual Allegations contained in Paragraphs A.1, A.2, A.4, C.1 and C.2. I hereby agree to the following penalty:

1. **My license to practice medicine shall be limited as follows:
I will examine and/or treat any female patient only in the presence of a chaperone, as set forth in Exhibit B.**

2. **I will complete one-hundred hours of Category I Continuing Medical Education (CME). Said CME shall address the issues of appropriate and/or sensitive examination of female patients. Any CME which I propose to take in satisfaction of this requirement is subject to the prior written approval of the Office of Professional Medical Conduct (OPMC), and must be submitted for said approval at least 30 days in advance of the course date. If Respondent, despite diligent effort, cannot locate any CME courses in the required subject matter, he may, subject to prior written approval of OPMC, take CME courses in other subject matter, including the following areas, to satisfy the requirement: medical ethics, communication/interaction with patients, and maintaining adequate medical records. All CME taken in satisfaction of this Order must be completed within one year of the effective date of this Consent Order.**

I further agree that the Consent Order for which I hereby apply shall impose the following conditions:

That, except during periods of actual suspension, Respondent shall maintain active registration of Respondent's license with the New York State Education Department Division of Professional

Licensing Services, and pay all registration fees. This condition shall be in effect beginning thirty days after the effective date of the Consent Order and will continue while the licensee possesses his/her license; and

That Respondent shall fully cooperate in every respect with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Order and in its investigation of all matters regarding Respondent. Respondent shall respond in a timely manner to each and every request by OPMC to provide written periodic verification of Respondent's compliance with the terms of this Order. Respondent shall meet with a person designated by the Director of OPMC as directed. Respondent shall respond promptly and provide any and all documents and information within Respondent's control upon the direction of OPMC. This condition shall be in effect beginning upon the effective date of the Consent Order and will continue while the licensee possesses his/her license.

I hereby stipulate that any failure by me to comply with such conditions shall constitute misconduct as defined by New York State Education Law §6530(29).

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

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

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


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

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

AFFIRMED:

DATED

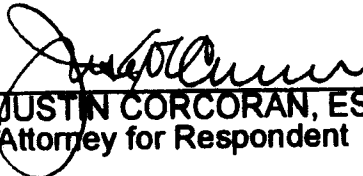
14 June 01



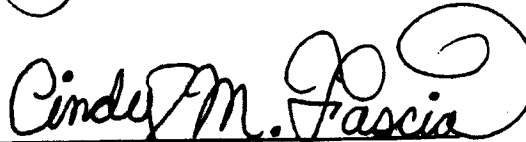
CARMELO VILLA, M.D.
RESPONDENT

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

DATE: 10/22/01


JUSTIN CORCORAN, ESQ.
Attorney for Respondent

DATE: 10/23/01


CINDY M. FASCIA
Associate Counsel
Bureau of Professional
Medical Conduct

DATE: 11/01/01


DENNIS J. GRAZIANO
Director
Office of Professional
Medical Conduct

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

IN THE MATTER
OF
CARMELO VILLA, M.D.

CONSENT
ORDER

Upon the proposed agreement of CARMELO VILLA, 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: 11/3/01



WILLIAM P. DILLON, M.D.
Chair
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
CARMELO VILLA, M.D. : CHARGES

X

CARMELO VILLA, M.D., Respondent, was authorized to practice medicine in New York State on September 15, 1975, by the issuance of license number 125346, by the New York State Education Department. Respondent is currently registered with the New York State Education Department to practice medicine through June 30, 2002, with a registration address of 14B Candlelight Court, Clifton Park, NY 12065

FACTUAL ALLEGATIONS

A. Respondent provided medical care to Patient A (patients are identified in Appendix) on or about November 10, 1998, at Newton Medical, 1662 Central Avenue, Albany, New York 12205. Respondent, during his physical examination of Patient A, engaged in the following conduct:

1. Respondent performed a breast examination and/or had contact with Patient A's breasts which examination and/or contact did not meet accepted medical and/or ethical standards.

2. Respondent performed a rectal examination and/or put his finger or fingers between Patient A's buttocks which examination and/or contact did not meet accepted medical and/or ethical standards.
3. Respondent failed to document the breast examination and/or contact with Patient A's breasts.
4. Respondent failed to document the rectal examination and/or contact with Patient A's buttocks.

B. Respondent provided medical care to Patient B on or about August 4, 1998, at Newton Medical.

1. Respondent failed to provide adequate initial care for Patient B's fractured ankle, including but not limited to Respondent's failure to ensure adequate immobilization and/or non-weight bearing status.
2. Respondent discharged Patient B in an inappropriate manner and/or with inappropriate orders.

C. Respondent, on or about November 11, 1998, wrote a letter to the Quality Management Department of Capital District Physicians Health Plan (hereafter CDPHP) in response to a complaint from Patient B's mother to CDPHP regarding Respondent's medical treatment of Patient B at Newton Medical on August 4, 1998.

1. Respondent told the CDPHP Quality Management Department that he had offered Patient B crutches during her August 4, 1998 visit and that Patient B had declined them, when in fact Respondent had not offered Patient B crutches nor had Patient B declined crutches, and Respondent knew such facts.
2. Respondent told the CDPHP Quality Management Department that he had offered to apply an ace wrap to Patient B's ankle but that she had declined, when in fact Respondent had not offered to apply an ace wrap nor had Patient B declined, and Respondent knew such facts.

SPECIFICATIONS

FIRST AND SECOND SPECIFICATIONS

MORAL UNFITNESS

Respondent is charged with professional misconduct by reason of his committing conduct in the practice of medicine which evidences moral unfitness to practice medicine in violation of New York Education Law §6530(20), in that Petitioner charges:

1. The facts in Paragraphs A and A.1 and/or A.2.
2. The facts in Paragraphs C and C.1 and/or C.2.

THIRD SPECIFICATION

HARASSING OR ABUSING A PATIENT

Respondent is charged with professional misconduct by reason of his harassing

or abusing a patient physically, in violation of New York Education Law §6530(31), in that Petitioner charges:

3. The facts in Paragraphs A and A.1 and/or A.2.

**FOURTH SPECIFICATION
FRAUDULENT PRACTICE**

Respondent is charged with professional misconduct by reason of his practicing medicine fraudulently in violation of New York Education Law §6530(2), in that Petitioner charges:

4. The facts in Paragraphs C and C.1 and/or C.2.

**FIFTH SPECIFICATION
NEGLIGENCE ON MORE THAN ONE OCCASION**

Respondent is charged with professional misconduct by reason of his practicing medicine with negligence on more than one occasion, in violation of New York Education Law §6530(3), in that Petitioner charges that Respondent committed two or more of the following:

5. The facts in Paragraphs A and A.1 and/or A.2 and/or A.3 and/or A.4;
and/or B and B.1 and/or B.2.

SIXTH SPECIFICATION
FAILURE TO MAINTAIN ACCURATE RECORDS

Respondent is charged with professional misconduct by reason of his failure to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient, in that Petitioner charges:

6. The facts in Paragraphs A and A.3 and/or A.4.

DATED: *Oct. 23*, 2001
Albany, New York


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

EXHIBIT B

CHAPERONE

1. 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 Respondent which could pose a conflict with the chaperone's responsibilities. The chaperone shall be proposed by Respondent and subject to the written the approval of the Director of OPMC.
2. Prior to the approval of any individual as chaperone, Respondent shall cause the proposed chaperone to execute and submit to the Director of OPMC an acknowledgment of her agreement to undertake all of the responsibilities of the role of chaperone. Said acknowledgment 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:
 - a. Report quarterly to OPMC regarding her chaperoning of Respondent's practice.
 - b. 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.
 - c. 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.
 - d. Provide copies of the log described in paragraph c, above, to OPMC at least quarterly and also immediately upon the Director's request.
3. With regard to any employment of Respondent by any branch of the United States' armed forces/the military/reserves, Respondent will obtain affidavits from his military supervisors stating that Respondent has provided this Consent Agreement and the attached Exhibits A and B to said supervisors, and that said supervisors are aware of the chaperone requirement set forth herein, but that the armed forces may knowingly choose, at its own discretion, to waive or modify said requirement solely with regard to Respondent's employment by the armed forces/military/reserves. Said affidavit shall also state that the Consent Agreement and the attached exhibits will be placed in Respondent's military file so that future supervisors will have access to these documents.