

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.

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NYS Department of Health

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NYS Department of Health

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Office of Professional Medical Conduct

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

September 28, 2001

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Naeem Ahmed, M.D. 2905 Hylan Blvd. Staten Island, NY 10306

RE:

License No. 140418

Dear Dr. Ahmed:

Enclosed please find Order #BPMC 01-225 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect September 28, 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.

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

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

Bureau of Accounts Management New York State Department of Health Corning Tower, Room 1258 Empire State Plaza Albany, New York 12237

Sincerely,

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

Executive Secretary

Board for Professional Medical Conduct

Enclosure

cc: Mark Fuhrman, Esq.

Lufshutz, Polland and Associates, P.C.

675 Third Avenue New York, NY 10017

Daniel Guenzburger, Esq.

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

IN THE MATTER OF NAEEM AHMED, M.D.

CONSENT
AGREEMENT
AND
ORDER
BPMC No. 01-225

NAEEM AHMED, M.D., representing all statements herein made to be true, deposes and says:

That on or about October 19, 1979 I was licensed to practice as a physician in the State of New York, having been issued License No. 140418 by the New York State Education Department.

My current address is 2905 Hylan Boulevard, Staten Island, 10306 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 one specification of professional misconduct.

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

I agree not to contest the specification of misconduct, in full satisfaction of the charges against me. I hereby agree to the following penalty:

Censure and Reprimand and a ten thousand dollar fine (\$10,000.00)

The fine is payable in full within ninety (90) days of the effective date of this Order. Payments must be submitted to:

Bureau of Accounts Management
New York State Department of Health

Empire State Plaza
Corning Tower, Room 1245
Albany, New York 12237.

I 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 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.

DATED 68 21 01

NAEEM AHMED, M.D.

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

DATE: 1/2// 1/

MARK FUHRMAN, ESQ Lifshutz, Polland and Associates Attorney for Respondent

DATE: 9 17/01

DANIEL GUENZBURGER Associate Counsel Bureau of Professional Medical Conduct

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DATE: 9 25 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

NAEEM AHMED, M.D.

STATEMENT OF CHARGES

NAEEM AHMED, M.D., the Respondent, was authorized to practice medicine in New York State on or about October 19, 1979, by the issuance of license number 140418 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. On or about and between June 15, 2000 and June 27, 2000, the Respondent treated Patient A, an 89 year old male at Staten Island University Hospital, Staten Island, New York. (Patient A is identified in the annexed Appendix.)
 - Respondent inaccurately recorded in the hospital chart that he had evaluated Patient A on June 24, 2000.

FAILURE TO MAINTAIN RECORDS

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

Exhibit A

1. Paragraph A.

DATED:

July , 2001 New, New York

Roy Nemerson Deputy Counsel Bureau of Professional Medical Conduct

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

OF NAEEM AHMED, M.D.

CONSENT ORDER

Upon the proposed agreement of NAEEM AHMED, 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: 9 27/01

Chair
State Board for Professional
Medical Conduct