



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*

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

Dennis J. Graziano, Director
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

July 18, 2002

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Manis Nandi, M.D.
38 Front Street
Binghamton, NY 13905

RE: License No. 113646

Dear Dr. Nandi:

Enclosed please find Order #BPMC 02-222 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect July 18, 2002.

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: Ms. Susan Fortin Lesser, Esq.
Scolaro, Shulman, Cohen, Fetter & Burstein, P.C.
90 President Plaza
Corner of Townsend and Harrison Streets
Syracuse, NY 13202-2200

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

IN THE MATTER
OF
MANIS NANDI, M.D.

CONSENT
AGREEMENT
AND
ORDER

BPMC No. 02-222

MANIS NANDI, M.D., Respondent, says:

That on or about the 1st day of August 1972, I was licensed to practice as a physician in the State of New York, having been issued License No. 113646 by the New York State Education Department.

My current office address is 38 Front Street, Binghamton, New York 13905, 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 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 agree not to contest the 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 permanently limited, pursuant to §230-a of the Public Health Law, to preclude the practice of medicine. I shall be precluded from patient contact (care), diagnosing, treating, prescribing or operating for any human condition. I shall be precluded from consulting on medical issues. I shall be permitted to teach medicine and biochemistry, and to take part in medical research and publications. I agree to comply with the terms of practice limitation attached hereto, made a part hereof, and marked as Exhibit "B".

I further agree that the Consent Order for which I hereby apply shall impose a condition that Respondent shall change his registration status to "inactive" with the New York State Education Department Division of Professional Licensing Services and provide proof of such change to the Director of the Office of Professional Medical Conduct within thirty days of the effective date of this Order. Failure to comply with such condition 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 the same. I agree that such order shall be effective upon issuance by the Board, which may be accomplished by making, 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: 06.18.2002


Mani Nandi, MD
MANIS NANDI, 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.

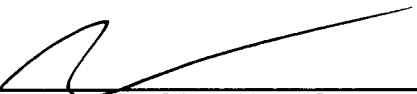
DATED: 6-20-02


SUSAN FORTIN LESSER, ESQ.
Attorney for Respondent

DATED: 6/25/02


JEFFREY J. CONKLIN, ESQ.
Associate Counsel
Bureau of Professional
Medical Conduct

DATED: 7/02/02


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
MANIS NANDI, M.D.

CONSENT
ORDER

Upon the proposed agreement of Manis Nandi, M. D. (Respondent) for Consent Order, which application is made a part hereof, it is agreed to and

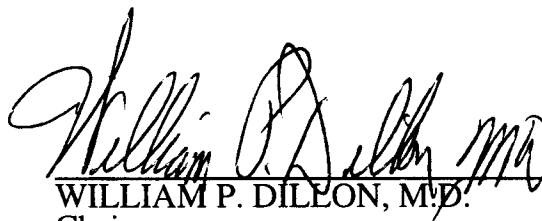
ORDERED, that the application and the provisions thereof are hereby adopted and so ORDERED; and it is further

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: _____

7/16/02



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

IN THE MATTER
OF
MANIS NANDI, M.D.

STATEMENT
OF
CHARGES

MANIS NANDI, M.D., Respondent, was authorized to practice medicine in New York State on or about the 8th day of August, 1972, by the issuance of license number 113646 by the New York State Education Department. Respondent is currently registered with the New York State Education Department to practice medicine, with an office address of 38 Front Street, Binghamton, New York 13905.

FACTUAL ALLEGATIONS

- A. Respondent provided medical care to Patient A, hereinafter identified in the annexed Appendix, from on or about June 4, 1994, through August 18, 2000, at his office located at 38 Front Street, Binghamton, New York, 13905. Respondent's care and treatment of Patient A deviated from accepted standards of medical care in the following manner:
1. Respondent, on various occasions, failed to adequately assess Patient A's condition and arrive at an appropriate plan of treatment for Patient A, and/or failed to document any such assessment and plan;
 2. Respondent, on various occasions, failed to maintain a record for Patient A in accordance with accepted medical standards of care and/or in a manner that accurately reflected his care and treatment of Patient A;

3. Respondent, on various occasions, failed to conduct pulse or cardiopulmonary examinations of Patient A when said patient showed evidence of peripheral edema, and/or failed to document any such examinations; and

4. Respondent, on various occasions, changed medications which had been prescribed for Patient A without any notation in the medical chart as to when or why such changes were made.

B. Respondent provided medical care to Patient B, hereinafter identified in the annexed Appendix, from on or about May 25, 1989, through October 10, 2000, at his office. Respondent's care and treatment of Patient B deviated from accepted standards of medical care in the following manner:

1. Respondent, on various occasions, changed or stopped medications prescribed for Patient B without any documentation as to when or why the changes were made; and

2. Respondent, who had prescribed Ace inhibitors and diuretics for Patient B, failed to conduct indicated follow-up evaluations for Patient B's creatinine and electrolyte levels.

C. Respondent provided medical care to Patient C, hereinafter identified in the annexed Appendix, from on or about January 3, 1997, through April 27, 1999, at his office. Respondent's care and treatment of Patient C deviated from accepted standards of medical care in the following manner:

1. Respondent, on various occasions, failed to maintain a record for Patient C in accordance with accepted medical standards of care and/or in a manner that accurately reflected his care and treatment of Patient C; and
 2. Respondent, on various occasions, failed to conduct or otherwise arrange for indicated mammography examinations, pap smears, breast examinations, and fecal occult blood tests. Respondent also failed to follow-up on abnormal electrolyte levels and abnormal liver function tests; and
- D. Respondent provided medical care to Patient D, hereinafter identified in the annexed Appendix, from on or about December 3, 1999, through October 10, 2000, at his office. Respondent's care and treatment of Patient D deviated from accepted standards of medical care in the following manner:
1. Respondent, on various occasions, stopped or changed medications prescribed for Patient D without documenting when or why such changes were made, and medication doses did not match those noted by Respondent in Patient D's chart;
 2. Respondent, on various occasions, failed to perform cardiac examinations when Patient D was noted to be hypotensive, and/or failed to document any such examinations; and
 3. Respondent, on various occasions, failed to perform indicated cardiovascular and cardiopulmonary examinations, and/or failed to document any such examinations.

E. Respondent provided medical care to Patient E, hereinafter identified in the annexed Appendix, from on or about January 27, 1981, through September 10, 1999, at his office. Respondent's care and treatment deviated from accepted standards of medical care in the following manner:

1. On April 1, 1985, Patient E presented at Respondent's office with complaints of visual black outs. Respondent failed to perform a fundoscopic examination of Patient E, and/or failed to document any such examination;
2. On July 29, 1991, Respondent saw Patient E at his office. At that time, Patient E complained of frequent nosebleeds and dizziness when said patient stood up. Respondent failed to conduct a physical examination or take measurements of Patient E's orthostatic blood pressure and pulse, and/or failed to document any such examination or measurements.

SPECIFICATIONS OF MISCONDUCT

FIRST SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct within the meaning of New York Education Law §6530 (3) by practicing the profession of medicine with negligence on more than one occasion as alleged in two or more of the following:

1. The facts set forth in paragraphs "A" and "A1";
2. The facts set forth in paragraphs "A" and "A3";
3. The facts set forth in paragraphs "A" and "A4";
4. The facts set forth in paragraphs "B" and "B2";
5. The facts set forth in paragraphs "C" and "C2";
6. The facts set forth in paragraphs "D" and "D2";
7. The facts set forth in paragraphs "D" and "D3";
8. The facts set forth in paragraphs "E" and "E1" and;
9. The facts set forth in paragraphs "E" and "E2".

SECOND SPECIFICATION

FAILING TO MAINTAIN ACCURATE RECORD

Respondent is charged with professional misconduct as defined by New York Education Law Sec. 6530 (32) by failing to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient, as alleged in the facts of the following:

1. The facts set forth in paragraphs "A" and "A2";
2. The facts set forth in paragraphs "B" and "B1";
3. The facts set forth in paragraphs "C" and "C1";and
4. The facts set forth in paragraphs "D" and " D1".

DATED: June , 2002
Albany, New York

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

EXHIBIT B

1. Respondent shall immediately cease and desist from engaging in the practice of medicine in accordance with the terms of the Order. In addition, Respondent shall refrain from providing an opinion as to professional practice or its application and from representing himself as being eligible to practice medicine.
2. Respondent shall within fifteen (15) days of the Order notify his patients of the cessation of his medical practice and will refer all patients to another licensed practicing physician for their continued care, as appropriate.
3. Respondent shall make arrangements for the transfer and maintenance of the medical records of his patients. Within thirty days of the effective date of the Order, Respondent shall notify OPMC of these arrangements including the appropriate and acceptable contact person's name, address, and telephone number who shall have access to these records. Original records shall be retained for at least six years after the last date of service rendered to a patient or, in the case of a minor, for at least six years after the last date of service or three years after the patient reaches the age of majority whichever time period is longer. Records shall be maintained in a safe and secure place which is reasonably accessible to former patients. The arrangements shall include provisions to ensure that the information on the record is kept confidential and made available only to authorized persons. When a patient or and/or his or her representative requests a copy of the patient's medical record or requests that the original medical record be forwarded to another health care provider, a copy of the record shall be promptly provided or forwarded at a reasonable cost to the patient (not to exceed seventy-five cents per page.) Radiographic, sonographic and like materials shall be provided at cost. A qualified person shall not be denied access to patient information solely because of their inability to pay.
4. In the event that Respondent holds a Drug Enforcement Agency (DEA) certificate, Respondent shall within fifteen (15) days advise the DEA in writing of the licensure action and shall surrender his DEA controlled substance privileges to the DEA. Respondent shall promptly surrender any unused DEA #222 U.S. Official Order Forms Schedules 1 and 2 to the DEA.
5. Respondent shall within fifteen (15) days return any unused New York State official prescription forms to the Bureau of Controlled Substances of the New York State Department of Health. Respondent shall cause all prescription pads bearing his name to be destroyed. If no other licensee is providing services at his practice location, all medications shall be properly disposed.
6. Respondent shall not share, occupy or use office space in which another licensee provides health care services. Respondent shall cause all signs to be removed within fifteen (15) days and stop all advertisements, professional listings whether in telephone directories or otherwise, professional stationery or billings by which his eligibility to practice is represented.
7. Respondent shall not charge, receive or share any fee or distribution of dividends for professional services rendered by himself or others while barred from engaging in the practice of medicine. Respondent may be compensated for the reasonable value of services lawfully rendered and disbursements incurred on a patient's behalf prior to the effective date of this Order.

8. If Respondent is a shareholder in any professional service corporation organized to engage in the practice of medicine and if his license is revoked, surrendered or suspended for a term of six months or more under the terms of this Order, Respondent shall divest himself of all financial interest in the professional services corporation in accordance with New York Business Corporation Law. Such divestiture shall occur within 90 days. If Respondent is the sole shareholder in a professional services corporation, the corporation must be dissolved or sold within ninety (90) days of the effective date of this Order.
9. Failure to comply with the above directives may result in a civil penalty or further criminal penalties as may be authorized pursuant to the law. Under Section 6512 of the Education Law it is a Class E Felony, punishable by imprisonment of up to 4 years, to practice the profession of medicine when such professional license has been suspended, revoked or annulled. Such punishment is in addition to the penalties for professional misconduct set forth in section 230 a1. of the Public Health Law, which includes fines of up to \$10,000 for each specification of charges of which the Respondent is found guilty and may include revocation of a suspended license.