



***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*

William P. Dillon, M.D.  
*Chair*

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

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

February 4, 2003

***CERTIFIED MAIL-RETURN RECEIPT REQUESTED***

Owen T. Yen, M.D.  
45 Route 25A  
Suite C  
Shoreham, NY 11786

RE: License No. 146883

Dear Dr. Yen:

Enclosed please find Order #BPMC 03-29 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect February 4, 2003.

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: Mitchell J. Birzon, Esq  
Birzon, Strang, Bazarasky & McGurk  
222 East Main Street  
Suite 212  
Smithtown, NY 11787

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

IN THE MATTER

OF

OWEN T. YEN, M.D.

CONSENT

ORDER

BPMC No. 03-29

Upon the application of (Respondent) OWEN T. YEN, M.D. in the attached Consent Agreement and Order, which is made a part of this Consent Order, it is

ORDERED, that the Consent Agreement, and its terms, are adopted and SO ORDERED, and it is further

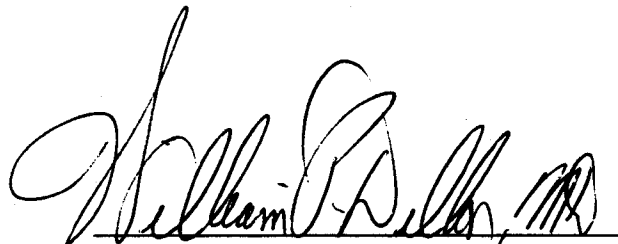
ORDERED, that this Order shall be effective upon issuance by the Board, either

- by mailing of a copy of this Consent Order, either by first class mail to Respondent at the address in the attached Consent Agreement or by certified mail to Respondent's attorney, OR
- upon facsimile transmission to Respondent or Respondent's attorney,

Whichever is first.

SO ORDERED.

DATED: 1/30/03



WILLIAM P. DILLON, M.D.

Chair

State Board for Professional Medical Conduct

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

**IN THE MATTER**

**OF**

**OWEN T. YEN, M.D.**

**CONSENT  
AGREEMENT  
AND  
ORDER**

OWEN T. YEN, M.D., representing that all of the following statements are true,  
deposes and says:

That on or about July 10, 1981, I was licensed to practice as a physician in  
the State of New York, and issued License No. 146883 by the New York State  
Education Department.

My current address is 45 Route 25A, Suite C, Shoreham, N.Y. 11786, and I  
will advise the Director of the Office of Professional Medical Conduct of any change  
of 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, marked as Exhibit "A", is attached to and  
part of this Consent Agreement.

I do not contest the First Specification, Recordkeeping, in full satisfaction of  
the charges against me, and agree to the following penalty:

I shall be subject to a Censure and Reprimand, pursuant to  
§230-a(1) of the Public Health Law.

I further agree that the Consent Order shall impose the following conditions:

That Respondent shall maintain current registration of licensure with the New York State Education Department Division of Professional Licensing Services (except during periods of actual suspension), and shall pay all registration fees. This condition shall take effect thirty (30) days after the Consent Order's effective date and will continue so long as Respondent remains licensed in New York State; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Order and in its investigations of matters concerning Respondent. Respondent shall respond in a timely manner to all OPMC requests for written periodic verification of Respondent's compliance with this Order. Respondent shall meet with a person designated by the Director of OPMC, as directed. Respondent shall respond promptly and provide all documents and information within Respondent's control, as directed. This condition shall take effect upon the Board's issuance of the Consent Order and will continue so long as Respondent remains licensed in New York State.

I stipulate that my failure to comply with any conditions of this Order shall constitute misconduct as defined by New York State Education Law §6530(29).

I agree that if I am charged with professional misconduct in future, this Consent Agreement and Order **shall** be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to the Public Health Law.

I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that this Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent Order by first class mail to me at the address in this Consent Agreement or to my attorney by certified mail, OR upon facsimile transmission to me or my attorney, whichever is first.

I ask the Board to adopt this Consent Agreement of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's adoption of this Consent Agreement, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the Consent Order for which I apply, whether administratively or judicially, I agree to be bound by the Consent Order, and ask that the Board adopt this Consent Agreement.

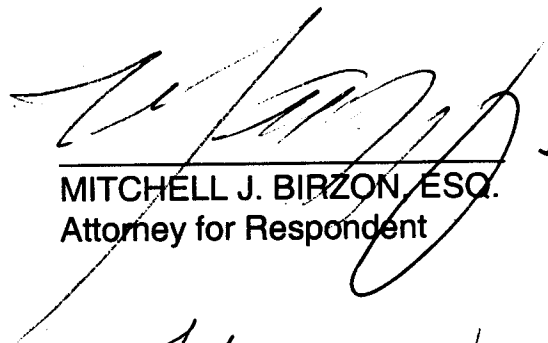
DATED

1/15/03

  
\_\_\_\_\_  
OWEN T. YEN, M.D.  
RESPONDENT

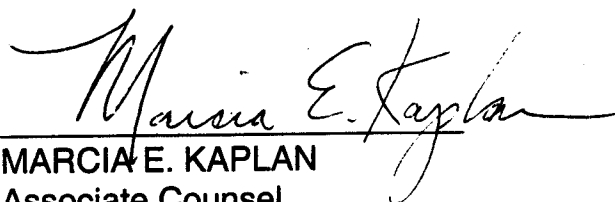
The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions.

DATE: 1/15/03



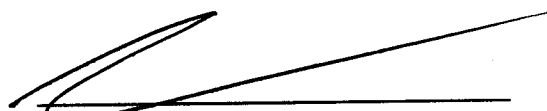
MITCHELL J. BIRZON, ESQ.  
Attorney for Respondent

DATE: January 21, 2003



MARCIA E. KAPLAN  
Associate Counsel  
Bureau of Professional Medical Conduct

DATE: January 23, 2003



DENNIS J. GRAZIANO  
Director  
Office of Professional Medical Conduct

**EXHIBIT "A"**

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

**IN THE MATTER  
OF  
OWEN T. YEN, M.D.**

**STATEMENT  
OF  
CHARGES**

OWEN T. YEN, M.D., the Respondent, was authorized to practice medicine in New York State on or about July 10, 1981, by the issuance of license number 146883 by the New York State Education Department.

**FACTUAL ALLEGATIONS**

- A. Respondent failed to maintain appropriate medical records for Patient A, a colleague, for whom he prescribed controlled substances during the period from on or about February 13, 1998 through on or about August 31, 2000.

**SPECIFICATION OF CHARGES**

**FIRST SPECIFICATION**

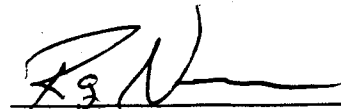
**FAILURE TO MAINTAIN RECORDS**

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:

1. Paragraph A.



DATED: January 21, 2003  
New York, New York



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Roy Nemerson  
Deputy Counsel  
Bureau of Professional Medical Conduct