



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

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

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

July 22, 2004

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Srinivasarao C. Yaganti, M.B.B.S
1837 Gallway Drive
Belleville, IL 62220

Re: License No. 203669

Dear Dr. Yaganti:

Enclosed please find Order #BPMC 04-162 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect July 29, 2004.

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 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

cc: Edward F. Bruno, Esq.
Bruno & Weiner
233 East Wacker Drive
Suite 4311
Chicago, IL 60601

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

**IN THE MATTER
OF
SRINIVASARAO C. YAGANTI, M.B.B.S.
CO-04-03-1436-A**

**CONSENT AGREEMENT
AND ORDER**

BPMC No. 04-162

SRINIVASARAO C. YAGANTI, M.B.B.S., states:

That on or about July 3, 1996, I was licensed to practice as a physician in the State of New York, having been issued License No. 203669 by the New York State Education Department.

My current address is 1837 Gallway Drive, Belleville, IL 62220, and I will advise the Director of the Office of Professional Medical Conduct of any change of my address within thirty (30) days thereof.

I understand that the New York State Board for Professional Medical Conduct has charged me with two (2) specifications of professional misconduct.

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

I do not contest Factual Allegations A and B(2) and the Second Specification, in full satisfaction of the charges against me. I agree, hereby, to the following penalty:

Two (2) years probation in accordance with Exhibit B attached, hereto, to run concurrent with the probation imposed by the State of Illinois, Department of Professional Regulation, January 2, 2004, Consent Order; and

Respondent shall not conduct breast, pelvic, genital, urinary, prostate or rectal examinations without a chaperone being present.

Should I practice medicine in New York state or in any other jurisdiction where that practice is predicated on my New York state license to practice medicine prior to my license being restored by the State of Illinois, I shall provide ninety (90) days notice in writing, petitioning the State Board for Professional Medical Conduct for a Modification Order, permitting me to practice as a physician under whatever probation, limitation(s), term(s), or further conditions, the Board, in its reasonable discretion, exercised by a Committee on Professional Medical conduct may impose. I understand and agree that the Committee's determination shall not be reviewable through recourse to the Administrative Review Board.

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

That, except during periods of actual suspension, I shall maintain current registration of my 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 Respondent possesses his license; and

That I 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. I 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. I shall meet with a person designated by the Director of OPMC as directed. I shall respond promptly and provide any and all documents and information within my 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 I possess my 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.

AFFIRMED

DATED 07/13/2004



SRINIVASARAO C. YAGANTI, M.B.B.S.
Respondent

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

DATE: _____


EDWARD F. BRUNO
Attorney for Respondent

DATE: 14 July 2004


ROBERT BOGAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 16 July 2004


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
SRINIVASARAO C. YAGANTI, M.B.B.S.

CONSENT ORDER

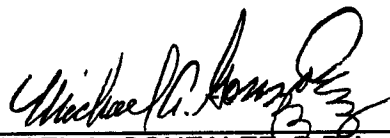
Upon the proposed agreement of **SRINIVASARAO C. YAGANTI, M.B.B.S.** (Respondent) for Consent Order, which application is made a part hereof, it is agreed to and

ORDERED, that the application and the provisions thereof are hereby adopted; and 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: 7/20/04


MICHAEL A. GONZALEZ, R.P.A.
Vice Chair
State Board for Professional
Medical Conduct

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

IN THE MATTER
OF
SRINIVASARAO C. YAGANTI, M.B.B.S.
CO-04-03-1436-A

STATEMENT
OF
CHARGES

SRINIVASARAO C. YAGANTI, M.B.B.S., the Respondent, was authorized to practice medicine in New York state on July 3, 1996, by the issuance of license number 203669 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about January 2, 2004, the State of Illinois, Department of Professional Regulation (hereinafter "Illinois Board"), by a Consent Order (hereinafter "Illinois Order"), placed Respondent's medical license on two (2) years probation and required him to display, in all examination rooms used by him, a sign prominently displayed mandating that "Pursuant to Department of Regulation Order, all breast, pelvis, genital, urinary, prostate and rectal exams conducted by Dr. Yaganti required the presence of a chaperone," based on improperly touching a patient during a routine office visit.

B. The conduct resulting in the Illinois Board disciplinary action against Respondent would constitute misconduct under the laws of New York state, pursuant to the following sections of New York state Law:

1. New York Education Law §6530(20) (moral unfitness); and/or
2. New York Education Law §6530(31) (willfully harassing, abusing, or intimidating a patient either physically or verbally).

SPECIFICATIONS
FIRST SPECIFICATION

Respondent violated New York Education Law §6530(9)(b) by having been found guilty of improper professional misconduct by a duly authorized professional disciplinary agency of another state where the conduct upon which the finding was based, would if committed in New York state, constitute professional misconduct under the laws of New York state, in that
Petitioner charges

1. The facts in Paragraphs A and/or B.

SECOND SPECIFICATION

Respondent violated New York Education Law §6530(9)(d) by having disciplinary action taken by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the disciplinary action would, if committed in New York state, constitute professional misconduct under the laws New York state, in that Petitioner charges:

2. The facts in Paragraphs A and/or B.

DATED: *May 18*, 2004
Albany, New York



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

EXHIBIT B

Terms of Probation

1. Respondent shall conduct himself in all ways in a manner befitting his professional status, and shall conform fully to the moral and professional standards of conduct and obligations imposed by law and by his profession.
2. Respondent shall submit written notification to the New York State Department of Health addressed to the Director, Office of Professional Medical Conduct (OPMC), Hedley Park Place, 433 River Street Suite 303, Troy, New York 12180-2299; said notice is to include a full description of any employment and practice, professional and residential addresses and telephone numbers within or without New York State, and any and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty days of each action.
3. Respondent shall fully cooperate with and respond in a timely manner to requests from OPMC to provide written periodic verification of Respondent's compliance with the terms of this Order. Respondent shall personally meet with a person designated by the Director of OPMC as requested by the Director.
4. Any civil penalty not paid by the date prescribed herein shall be subject to all provisions of law relating to debt collection by New York State. This includes but is not limited to the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [Tax Law section 171(27)]; State Finance Law section 18; CPLR section 5001; Executive Law section 32].
5. Respondent's professional performance may be reviewed by the Director of OPMC. This review may include, but shall not be limited to, a review of office records, patient records and/or hospital charts, interviews with or periodic visits with Respondent and his staff at practice locations or OPMC offices.
6. Respondent shall maintain legible and complete medical records which accurately reflect the evaluation and treatment of patients. The medical records shall contain all information required by State rules and regulations regarding controlled substances.
7. Respondent shall comply fully with the January 2, 2004, Consent Order of the Illinois Board and any extension or modification thereof.
8. Respondent shall provide a written authorization for the Illinois Board to provide the Director of OPMC with any/all information or documentation as requested by OPMC to enable OPMC to determine whether Respondent is in compliance with the Illinois Order.
9. Respondent shall submit quarterly a signed Compliance Declaration to the Director of OPMC, which truthfully attests whether Respondent has been in compliance with the Illinois during the declaration period specified.
10. Respondent shall comply with all terms, conditions, restrictions, limitations and penalties to which he is subject pursuant to the Order and shall assume and bear all costs related to compliance. Upon receipt of evidence of noncompliance with, or any violation of these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding and/or any such other proceeding against Respondent as may be authorized pursuant to the law.