



New York State Board for Professional Medical Conduct
433 River Street, Suite 303 • Troy, New York 12180-2299 • (518) 402-0863

Richard F. Daines, M.D.
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NYS Department of Health

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Director
Office of Professional Medical Conduct

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

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

Public

April 13, 2007

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Kunikata Hamada, M.D.
700 Kennedy East Blvd.
Apt. 147B
Guttenberg, NJ 07093

Re: License No. 106968

Dear Dr. Hamada:

Enclosed is a copy of Order #BPMC 07-75 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect April 20, 2007.

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. If the document(s) are lost, misplaced or destroyed, you are required to submit to this office an affidavit to that effect. Enclosed for your convenience is an affidavit. Please complete and sign the affidavit before a notary public and return it to: Office of Professional Medical Conduct, New York State Department of Health, 433 River Street, Suite 303, Troy, NY 12180-2299

Sincerely,

Ansel R. Marks, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

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

IN THE MATTER

OF

KUNIKATA HAMADA, M.D.
CO-07-02-0571-A

SURRENDER

ORDER

BPMC No. #07-75

KUNIKATA HAMADA, M.D., representing that all of the following statements are true, deposes and says:

That on or about August 20, 1970, I was licensed to practice as a physician in the State of New York and issued License No. 106968 by the New York State Education Department.

My current address is 7000 Kennedy East Blvd., Apt. 147B, Guttenberg, NJ 07093.

I understand that the New York State Board for Professional Medical Conduct has charged me with one (1) Specification of professional misconduct.

A copy of the Statement of Charges, marked as Exhibit "A", is attached to and part of this Surrender of License.

I am applying to the State Board for Professional Medical Conduct for permission to surrender my license as a physician in the State of New York on the grounds that I do not contest the one (1) Specification in full satisfaction of the charges against me.

I ask the Board to accept the Surrender of my License, and I agree to be bound by all of the terms set forth in attached Exhibit "B".

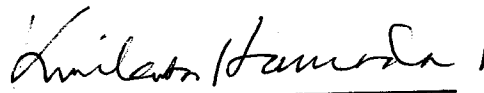
I understand that if the Board does not accept this Surrender, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this application shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall be without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

I agree that, if the Board accepts the Surrender of my License, the Chair of the Board shall issue a Surrender 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 Surrender Order by first class mail to me at the address in this Surrender of License, or to my attorney by certified mail, OR upon facsimile transmission to me or my attorney, whichever is first. The Order, this agreement, and all attached Exhibits shall be public documents, with only patient identities, if any, redacted. As public documents, they may be posted on the Department's website.

I ask the Board to accept this Surrender of License, which I submit of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's acceptance of this Surrender of License, 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 Surrender Order for which I apply, whether administratively or judicially, and I agree to be bound by the Surrender Order.

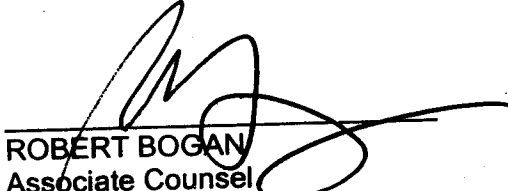
I understand and agree that the attorney for the Department, the Director of the Office of Professional Medical Conduct and the Chair of the State Board for Professional Medical Conduct each retain complete discretion either to enter into the proposed agreement and Order, based upon my application, or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

Date: April 2, 2007

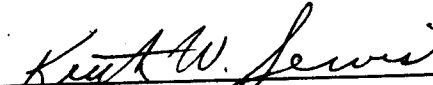

KUNIKATA HAMADA, M.D.
Respondent

The undersigned agree to Respondent's attached Surrender of License and to its proposed penalty, terms and conditions.

Date: 9 April, 2007


ROBERT BOGAN
Associate Counsel
Bureau of Professional Medical Conduct

Date: 4/11/07, 2007


KEITH W. SERVIS
Director, Office of Professional
Medical Conduct

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

IN THE MATTER
OF
KUNIKATA HAMADA, M.D.
CO-07-02-0571-A

STATEMENT
OF
CHARGES

KUNIKATA HAMADA, M.D., Respondent, was authorized to practice medicine in New York state on August 20, 1970, by the issuance of license number 106968 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about December 13, 2006, the State of New Jersey, Department of Law & Public Safety, Division of Consumer Affairs, State Board of Medical Examiners, (hereinafter "New Jersey Board"), by a Consent Order Granting Surrender of License (hereinafter "New Jersey Order"), accepted the surrender of Respondent's license to practice medicine and surgery to be deemed a revocation, based on prescribing of Controlled Dangerous Substances.

B. The conduct resulting in the New Jersey Board disciplinary actions 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(3) (negligence on more than one occasion).

SPECIFICATION

Respondent violated New York State Education Law §6530 (9)(d) by having surrendered his license to practice medicine after a disciplinary action was instituted by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the surrender 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.

DATED: *April 4*, 2007
Albany, New York


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

ORDER

Upon the application of (Respondent), **KUNIKATA HAMADA, M.D.** to Surrender his license as a physician in the State of New York, which is made a part of this Surrender Order, it is


ORDERED, that the Surrender, and its terms, are adopted and it is further

ORDERED, that Respondent's name be stricken from the roster of physicians in the State of New York; it is further

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

SO ORDERED

DATED: 4-12-, 2007


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