



Department of Health

KATHY HOCHUL
Governor

JAMES V. McDONALD, M.D., M.P.H.
Commissioner

JOHANNE E. MORNE, M.S.
Executive Deputy Commissioner

February 14, 2024

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Louise L. Tichenor, P.A.


Re: License No. 006623

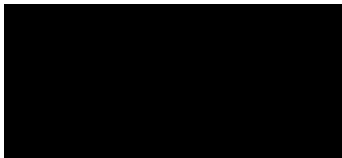
Dear Louise Tichenor:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Modification Order No. 24-039. This order and any penalty provided therein goes into effect February 21, 2024.

The Board Order checklist requires your review and compliance as it relates to your Order.

Please direct any questions to: Board for Professional Medical Conduct, Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204, telephone # 518-402-0846.

Sincerely,



David Besser, M.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

IN THE MATTER
OF
LOUISE TICHENOR, P.A.

MODIFICATION
ORDER

Upon the proposed Application for a Modification Order of Louise Tichenor, P.A.,
(Respondent), which is made a part of this Modification Order, it is agreed to and

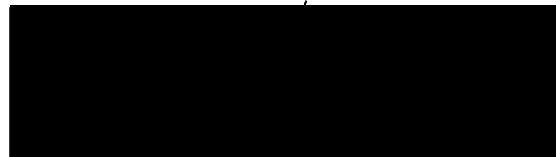
ORDERED, that the attached Application, and its terms, are adopted and SO
ORDERED, and it is further

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

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

SO ORDERED.

DATE: 2/13/2024



THOMAS T. LEE, M.D.
Chair
State Board for Professional Medical Conduct

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

IN THE MATTER
OF
LOUISE TICHENOR, P.A.

MODIFICATION
AGREEMENT
AND
ORDER

Louise Tichenor P.A., represents that all of the following statements are true:

That on or about December 29, 1998, I was licensed to practice as a physician assistant in the State of New York and issued License No.006623 by the New York State Education Department.

My current address is _____

and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

I am currently subject to BPMC Order #BPMC 08-133 (Attachment I) (henceforth "Original Order"), which was issued upon an Application For Consent Order signed by me on July 11, 2008 (henceforth Original Application"), adopted by the Original Order. I hereby apply to the State Board for Professional Medical Conduct for an Order (henceforth "Modification Order"), modifying the Original Order, as follows:

The sanction imposed in the Original Order was:

Pursuant to N.Y. Pub. Health Law § 230-a(3), my license to practice medicine in New York State shall be subject to a restriction whereby I will be

permanently prohibited from engaging in employment with a federal, state, county or municipal prison, jail or correctional facility;

Pursuant to N.Y. Pub. Health Law § 230-a(9), I shall be placed on probation for a period of 36 months, subject to the terms set forth in attached Exhibit "B."

The sanction imposed shall be modified to read as follows:

- Pursuant to N.Y. Pub. Health Law § 230-a(6), Respondent shall be subject to a limitation precluding registration or issuance of any further license; and
- That Respondent, who does not currently practice in the State of New York, shall be precluded from practicing as a physician assistant in New York State, from practicing in any setting where Respondent's practice is based solely on Respondent's New York license, and from further reliance upon Respondent's New York license to practice as a physician assistant to exempt Respondent from the licensure, certification or other requirements set forth in statute or regulation for the practice of any other profession licensed, regulated or certified by the Board of Regents, Department of Education, Department of Health or the Department of State; and
- That Respondent shall, within 30 days of the issuance of the Modification Order, notify the New York State Education Department, Division of Professional Licensing Services, that Respondent's license status is "inactive", and shall provide proof of such notification to the Director of OPMC immediately upon

having done so, and shall not reactivate or reregister the license at any time.

This Modification Order shall strike the Condition in the Original Order requiring Respondent to maintain active registration of Respondent's license with the New York State Education Department, Division of Professional Licensing Services, to pay all registration fees; and

- That Respondent shall comply with all the conditions set forth in attached "Attachment II" ("Requirements for Closing a Medical Practice Following an Agreement to Never Register/Never Practice");

and

All remaining Terms and Conditions will continue as written in the Original Order.

I make this Application of my own free will and accord and not under duress, compulsion or restraint, and seek the anticipated benefit of the requested Modification. In consideration of the value to me of the acceptance by the Board of this Application, I knowingly waive my right to contest the Original Order or the Modification Order for which I apply, whether administratively or judicially, and ask that the Board grant this Application.

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 1/25/24

A black rectangular redaction box covers the signature of Louise Tichenor. A handwritten mark, possibly a checkmark or the number '1', is visible above the redaction.

LOUISE TICHENOR, P.A.
RESPONDENT

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

DATE: _____

, ESQ.
Attorney for Respondent

DATE: February 2, 2024

COURTNEY BERRY
Associate Counsel
Bureau of Professional Medical Conduct

DATE: February 13, 2024

SHELLY WANG BANDAGO
Director
Office of Professional Medical Conduct

ATTACHMENT I

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

IN THE MATTER
OF
LOUISE TICHENOR, R.P.A.

CONSENT
ORDER

BPMC No. 08-133

Upon the application of (Respondent) Louise Tichenor, R.P.A., 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 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: 7-23-2008

Redacted Signature

KENDRICK A. SEARS, 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
LOUISE TICHENOR, R.P.A.

CONSENT
AGREEMENT
AND
ORDER

Louise Tichenor, R.P.A., representing that all of the following statements are true, deposes and says:

That on or about 1998, I was licensed to provide medical services as a physician assistant in the State of New York, and issued License No. 006623 by the New York State Education Department.

My current address is Redacted Address, 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 two specifications of professional misconduct.

A copy of the Statement of Charges, marked as Exhibit A, is attached to and part of this Consent Agreement.

I plead no contest to the Statement of Charges, in full satisfaction of the charges against me, and agree to the following penalty:

Pursuant to Section 230-a(3) of the Public Health Law, my license to practice medicine shall be subject to a restriction whereby I will be permanently prohibited from engaging in employment with a federal, state, county or municipal prison, jail, or correctional facility.

Pursuant to Section 230-a(9) of the Public Health Law, I shall be placed on probation for a period of 36 months, subject to the terms set forth in the attached Exhibit B.

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 the future, this Consent Agreement and Order shall be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

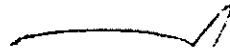
I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall 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: 7/11/08



Redacted Signature

LOUISE TICHENOR, R.P.A.
RESPONDENT

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

DATED: 7/11/2008 By ~~O'CONNELL AND ARONOWITZ~~
Redacted Signature
~~ANDREW R. SAFRANKO, ESQ.~~
Attorney for Respondent

DATED: 7/15/2008
Redacted Signature
CINDY MCFASCIA
Associate Counsel
Bureau of Professional Medical Conduct

DATED: 7/21/2008
Redacted Signature
KEITH W. SERVIS
Director
Office of Professional Medical Conduct

IN THE MATTER
OF
LOUISE TICHENOR, R.P.A.

STATEMENT
OF
CHARGES

Louise Tichenor, R.P.A., Respondent, was authorized to perform medical services as a physician assistant in New York State on or about 1998, by the issuance of license number 006623 by the New York State Education Department. Respondent is currently registered with the New York State Education Department.

FACTUAL ALLEGATIONS

- A. Respondent provided medical care to Patient A (identified in Appendix) on or about December 7, 2004, in the infirmary at Upstate Correctional Facility (UCF) in Malone, New York, subsequent to Patient A's discharge from Albany Medical Center. Patient A had been in Albany Medical Center's Epilepsy Monitoring Unit from on or about November 30, 2004 until on or about December 6, 2004. Patient A was discharged from Albany Medical Center (AMC) back to the infirmary at UCF with a diagnosis of pseudoseizures. Patient A, per his discharge summary from AMC, was discharged on Carbatrol 800 mg. po bid.
1. Respondent discontinued Patient A's Carbatrol, despite having reviewed the Albany Medical Center neurologist's discharge summary which stated "The patient will be discharged on Carbatrol 800 mg. po bid."
 2. Respondent, after seeing that the Albany Medical Center neurologist's discharge summary stated that Patient A had a discharge diagnosis of pseudoseizures, engaged in the

following conduct:

- (i) Respondent wrongly assumed that pseudoseizures were "fake seizures" and/or failed to make reasonable efforts to ascertain the correct medical meaning of the term pseudoseizures.
 - (ii) Respondent failed to contact Albany Medical Center for further information and/or clarification regarding the AMC discharge diagnosis of pseudoseizures and/or the AMC discharge instructions from the neurologist that Patient A was to receive Carbatrol 800 mg. po bid.
 - (iii) Respondent discontinued Patient A's Carbatrol and/or assumed that pseudoseizures were "fake seizures" without any stated and/or documented medical basis.
3. Respondent failed to obtain appropriate consultation with a physician or with a medical provider familiar with Patient A's history prior to discontinuing Patient A's Carbatrol.
 4. Respondent, when she discontinued Patient A's Carbatrol, also ordered that Patient A be returned to the cell block, where medical observation, monitoring and/or access is more limited and/or more difficult to obtain than in the infirmary.
 5. Respondent, despite the fact she had never seen or treated Patient A prior to December 7, 2004, made her decision to discontinue Patient A's Carbatrol and return him to the cell block

based not solely on medical information pertaining to Patient A, but based at least in part on Respondent's attitude toward and/or impressions of the inmate population in general.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

GROSS NEGLIGENCE

Respondent is charged with professional misconduct by reason of her practicing with gross negligence on a particular occasion in violation of N.Y. Educ. Law §6530(4), in that Petitioner charges:

1. The facts in Paragraphs A and A.1; and/or A.2 and A.2(i) and/or A.2(ii) and/or A.2(iii); and/or A.3 and/or A.4 and/or A.5 and/or A.6.

SECOND SPECIFICATION

GROSS INCOMPETENCE

Respondent is charged with professional misconduct by reason of her practicing with gross incompetence in violation of N.Y. Educ. Law §6530(6), in that Petitioner charges:

2. The facts in Paragraphs A and A.1; and/or A.2 and A.2(i) and/or A.2(ii) and/or A.2(iii); and/or A.3 and/or A.4 and/or A.5 and/or A.6.

DATE: June 19, 2008
Albany, New York

Redacted Signature

Peter D. Van Buren
Deputy Counsel
Bureau of Professional Medical Conduct

EXHIBIT B

Terms of Probation

1. Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by New York State Education Law §6530 or §6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to New York State Public Health Law §230(19).
2. 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.
3. Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Hedley Park Place, 433 River Street Suite 303, Troy, New York 12180-2299 with the following information, in writing, and ensure that such information is kept current: a full description of Respondent's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty (30) days of each action.
4. Respondent shall cooperate fully with, and respond in a timely manner to, OPMC requests to provide written periodic verification of Respondent's compliance with the terms of this Consent Order. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
5. Respondent's failure to pay any monetary penalty by the prescribed date shall subject Respondent to all provisions of law relating to debt collection by New York State, including but 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].
6. The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of thirty (30) consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in, or intends to leave, active medical practice in New York State for a consecutive thirty (30) day period. Respondent shall then notify the Director again at least fourteen (14) days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period will resume and Respondent shall fulfill any unfulfilled probation terms.
7. The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records and/or hospital charts; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
8. Respondent shall maintain complete and legible medical records that

accurately reflect the evaluation and treatment of patients and contain all information required by State rules and regulations concerning controlled substances.

PRACTICE MONITOR

9. Within thirty days of the effective date of the order, Respondent shall provide medical services only when monitored by a licensed physician, board certified in an appropriate specialty, ("practice monitor") proposed by Respondent and subject to the written approval of the Director of OPMC.
 - a. Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, on a random unannounced basis at least monthly and shall examine a selection (no fewer than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.
 - b. Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
 - c. Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.

CONTINUING MEDICAL EDUCATION

10. Respondent, during the period of probation, shall complete a total of 30 hours of Category I Continuing Medical Education (CME). Said CME is to be in the areas of pediatrics, primary care/ family practice and medical recordkeeping. All CME courses are subject to the prior written approval of OPMC. Said 30 hours of CME shall be in addition to any other CME that Respondent is required to complete to maintain licensure in any jurisdiction or privileges in any facility.
11. Respondent shall comply with this Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or violation of these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.
12. Upon my successful completion of two years of the period of probation, I may petition the Director for an early release therefrom and the Director shall exercise reasonable discretion in deciding whether to grant my petition.

EXHIBIT "B"

Requirements for Closing a Medical Practice (Following Agreement to Never Register/Never Practice)

1. Licensee shall immediately cease and desist from engaging in practice as a physician assistant in New York State, or under Licensee's New York license, in accordance with the terms of the Order. In addition, Licensee shall refrain from providing an opinion as to professional practice or its application and from representing that Licensee is eligible to practice as a physician assistant in New York or pursuant to a New York license.
2. Within 5 days of the Order's effective date, Licensee shall deliver Licensee's current biennial registration, if any, to the Office of Professional Medical Conduct (OPMC) at Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204-2719.
3. Within 15 days of the Order's effective date, Licensee shall, with regard to New York practice or practice anywhere pursuant to Licensee's New York license, notify all patients of the cessation of Licensee's practice and shall refer all patients to another licensed practitioner for continued care, as appropriate. Licensee shall notify, in writing, each health care plan with which the Licensee contracts or is employed, and each hospital where Licensee has privileges, that Licensee has ceased practice as a physician assistant. Within 45 days of the Order's effective date, Licensee shall provide OPMC with written documentation that all patients and hospitals have been notified of the cessation of Licensee's practice as a physician assistant.
4. Licensee shall, with regard to New York practice or practice anywhere pursuant to Licensee's New York license, make arrangements for the transfer and maintenance of all patient medical records. Within 30 days of the Order's effective date, Licensee shall notify OPMC of these arrangements, including the name, address, and telephone number of an appropriate and acceptable contact persons who shall have access to these records. Original records shall be retained for at least 6 years

after the last date of service rendered to a patient or, in the case of a minor, for at least 6 years after the last date of service or 3 years after the patient reaches the age of majority, whichever time period is longer. Records shall be maintained in a safe and secure place that is reasonably accessible to former patients. The arrangements shall include provisions to ensure that the information in the record is kept confidential and is available only to authorized persons. When a patient or a patient's representative requests a copy of the patient's medical record, or requests that the original medical record be sent 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 75 cents per page.) Radiographic, sonographic and similar materials shall be provided at cost. A qualified person shall not be denied access to patient information solely because of an inability to pay.

5. In the event that Licensee holds a Drug Enforcement Administration (DEA) certificate for New York State, Licensee shall, within fifteen (15) days of the Order's effective date, advise the DEA, in writing, of the licensure action and shall surrender his/her DEA controlled substance privileges for New York State to the DEA. Licensee shall promptly surrender any unused DEA #222 U.S. Official Order Forms Schedules 1 and 2 for New York State to the DEA. All submissions to the DEA shall be addressed to Diversion Program Manager, New York Field Division, U.S. Drug Enforcement Administration, 99 Tenth Avenue, New York, NY 10011.
6. Within 15 days of the Order's effective date, Licensee shall return any unused New York State official prescription forms to the Bureau of Narcotic Enforcement of the New York State Department of Health. If no other licensee is providing services at Licensee's practice location, Licensee shall properly dispose of all medications.
7. Within 15 days of the Order's effective date, Licensee shall, with regard to New York practice or practice anywhere pursuant to Licensee's New York license, remove from the public domain any representation that Licensee is eligible to practice as a physician assistant, including all related signs, advertisements, professional listings (whether in telephone directories, internet or otherwise),

professional stationery or billings. Licensee shall not share, occupy, or use office space in which another licensee provides health care services.

8. Licensee shall not, with regard to New York practice or practice anywhere pursuant to Licensee's New York license, charge, receive or share any fee or distribution of dividends for professional services rendered by Licensee or others while Licensee is barred from engaging in practice as a physician assistant. Licensee may be compensated for the reasonable value of services lawfully rendered, and disbursements incurred on a patient's behalf, prior to the Order's effective date.
9. If Licensee is a shareholder in any professional service corporation organized to engage in the practice of medicine in New York, Licensee shall divest all financial interest in the professional services corporation, in accordance with New York Business Corporation Law. Such divestiture shall occur within 90 days. If Licensee is the sole shareholder in a professional services corporation, the corporation must be dissolved or sold within 90 days of the Order's effective date.
10. Failure to comply with the above directives may result in a civil penalty or criminal penalties as may be authorized by governing law. Under N.Y. Educ. Law § 6512, it is a Class E Felony, punishable by imprisonment of up to 4 years, to practice as a physician assistant when a professional license has been suspended, revoked or annulled. Such punishment is in addition to the penalties for professional misconduct set forth in N.Y. Pub. Health Law § 230-a, which include fines of up to \$10,000 for each specification of charges of which the Licensee is found guilty and may include revocation of a suspended license.