STATE OF NEW YORK : DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT	x	
IN THE MATTER	:	
OF	:	ORDER
ALLEN B. CHEFITZ, M.D.	:	BPMC #93-188
	x	

Upon the application of Allen B. Chefitz, M.D. (Respondent) for Consent Order, which application is made a part hereof, it is

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

ORDERED, that this order shall take effect as of the date of the personal service of this order upon Respondent, upon receipt by Respondent of this order via certified mail, or seven days after mailing of this order by certified mail, whichever is earliest.

SO ORDERED,

DATED: 10 Movember 1993

Charles J. Vacanti, M.D. Chairperson State Board for Professional Medical Conduct

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

X	
IN THE MATTER	APPLICATION
:	FOR
OF :	CONSENT
ALLEN B. CHEFITZ, M.D. :	ORDER
X	

STATE OF NEW YORK) SS.: COUNTY OF NEW YORK)

ALLEN B. CHEFITZ, M.D., being duly sworn, deposes and says:

That on or about June 29, 1989, I was licensed to practice as a physician in the State of New York, having been issued License No. 178563-1 by the New York State Education Department.

I am currently registered with the New York State Education Department to practice as a physician in the State of New York for the period January 1, 1993 through December 31, 1994. My registration address is 2045 Bogart Avenue, Bronx, New York 10462.

I understand that the New York State Board for Professional Medical Conduct ("the Board") has charged me with one Specification of professional misconduct. A copy of the Statement of Charges, dated October 13, 1993, is annexed hereto, made a part hereof, and marked as Exhibit "A". I do not contest the allegation of professional misconduct asserted in the First Specification, in full satisfaction of the charge against me.

I hereby agree to the penalty, subject to the terms set forth in Exhibit B, attached hereto and made a part hereof, that I be required to perform 200 hours of public service in a manner and at a time and place as directed by the Board, such 200 hours of public service to be completed within two years from the date of any acceptance of of this Application.

I hereby make this Application to 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 am making this Application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner.

ALLEN B. CHEFITZ, M.D. RESPONDENT

Sworn to before me this 19 45 day of October , 19 95.

-

-

adu 506

NOTARY PUBLIC

CATHERINE A. MULITZ Notary Public, State of New York No. 4851584 Qualified in Nassau County Commission Expires February 3, 19____

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

:	APPLICATION
IN THE MATTER :	FOR
OF : ALLEN B. CHEFITZ, M.D.	CONSENT
ALLEN B. CHEFIIZ, M.D. :	ORDER

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

Date: 10-19-93

en B. July

ALLEN B. CHEFITZ, M.D. RESPONDENT

Date: October 19, 1993

PETER BERGMANN, ESQ. ATTORNEY FOR RESPONDENT

Date: //..... STACEY B. MONDSCHEIN ASSISTANT COUNSEL BUREAU OF PROFESSIONAL

MEDICAL CONDUCT

nov. 12, 1993 Date:

0-1

KATHLEEN M. TANNER DIRECTOR OFFICE OF PROFESSIONAL MEDICAL CONDUCT

Date: 10 Nounitar 1993

Ĺ J.

CHARLES J. VACANTI, M.D. CHAIRPERSON STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

EXHIBIT A

	STATE OF NEW YORK : DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT		
		-X	
	IN THE MATTER	:	STATEMENT
i.	OF	:	OF
	Allen B. Chefitz, M.D.	:	CHARGES
•		X	

Allen B. Chefitz, M.D., the Respondent, was authorized to practice medicine in New York State on June 29, 1989 by the issuance of license number 178563-1 by the New York State Education Department. The Respondent is currently registered with the New York State Education Department to practice medicine for the period January 1, 1993 through December 31, 1994.

FACTUAL ALLEGATION

A. On or about November 23, 1991, at Bronx Municipal Hospital Center, Pelham Parkway South and Eastchester Road, Bronx, New York 10461, Respondent removed a tattoo from the leg of Patient A (identified in the annexed Appendix) through the use of an electric cautery, without the expressed consent of Patient A.

FIRST SPECIFICATION

Respondent is charged with committing professional misconduct within the meaning of N.Y. Educ. Law Sec. 6530(26) (McKinney Supp. 1993) by performing professional services which were not

duly authorized by the patient or his or her legal representative in that Petitioner charges:

1. The facts in Paragraph A.

New York, New York DATED: October 13, 1993

чį

4.

11

_

Chris Stern Hyman Counsel Bureau of Professional Medical Conduct

EXHIBIT "B"

- 1. ALLEN B. CHEFITZ, M.D., 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 imposed by law and by his profession.
- 2. That Respondent shall submit written notification to the New York State Department of Health (NYSDOH), addressed to the Director, Office of Professional Medical Conduct, New York State Health Department, Corning Tower Building, 4th Floor, Empire State Plaza Albany, New York 12237 of any employment and practice, of Respondent's residence and telephone number, of any change in Respondent's employment, practice, residence, or telephone number within or without the State of New York.
- 3. Respondent shall submit written proof from the Division of Professional Licensing Services (DPLS), New York State Education Department (NYSED), that Respondent has paid all registration fees due and owing to the NYSED and Respondent shall cooperate with and submit whatever papers are requested by DPLS in regard to said registration fees, said proof from DPLS to be submitted by Respondent to the New York State Department of Health, addressed to the Director, Office of Professional Medical Conduct, as aforesaid, no later than the end of the first three months from the date of any acceptance of this Application.
- 4. Respondent shall submit written proof to the NYSDOH, addressed to the Director, Office of Professional Medical Conduct, as aforesaid, that 1) Respondent is currently registered with the NYSED, unless Respondent submits written proof that Respondent has advised DPLS, NYSED, that Respondent is not engaging in the practice of Respondent's profession in the State of New York and does not desire to register, and that 2) Respondent has paid any fines which may have previously been imposed upon Respondent by the Board or by the Board of Regents; said proof of the above to be submitted no later than January 31, 1994.
- 5. Respondent shall comply with all terms, conditions, restrictions, and penalties to which he is subject pursuant to the order of the Board.
- 6. So long as there is full compliance with every term herein set forth, Respondent may continue to practice his or her aforementioned profession, provided, however, in consideration of the Board accepting this Application, the Respondent hereby agrees that if the Director of the Office of Professional Medical Conduct, in her sole discretion, determines that Respondent has failed to complete the

required 200 hours of public service within two years from the effective date of the Consent Order issued upon this Application, the Chairperson of the Board shall be authorized to issue an order suspending Respondent's license to practice medicine in New York State for a period of three months. By making the instant Application, Respondent consents to such issuance of the Order of Suspension and agrees to be bound thereby.

i