



Department
of Health

Public

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Acting Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

April 20, 2015

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Nabil A. Elhadidy, M.D.
Heliopolis Medical, P.C.
200 Kenilworth Avenue
Staten Island, NY 10312

Re: License No. 194486

Dear Dr. Elhadidy:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Modification Order No. 15-093. This order and any penalty provided therein goes into effect April 27, 2015.

Please direct any questions to: Board for Professional Medical Conduct, 90 Church Street, 4th Floor, New York, NY 10007-2919, telephone # 212-417-4445.

Sincerely,

Katherine A. Hawkins, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Anthony Z. Scher, Esq.
Wood & Scher
222 Bloomingdale Road, Suite 311
White Plains, NY 10605

**IN THE MATTER
OF
NABIL AHMED ELHADIDY, M.D.**

**MODIFICATION
ORDER**

Upon the proposed Application for a Modification Order of NABIL AHMED ELHADIDY, M.D. (Respondent), which is made a part of this Modification Order, it is agreed to and

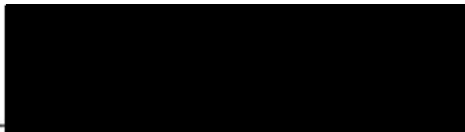
ORDERED, that the attached Application, and its terms, are adopted and SO ORDERED, and it is further

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: 4/17/2015


ARTHUR S. HENGERER, M.D.
Chair
State Board for Professional Medical Conduct

**IN THE MATTER
OF
NABIL AHMED ELHADIDY, M.D.**

**MODIFICATION
AGREEMENT
AND
ORDER**

NABIL AHMED ELHADIDY, M.D., represents that all of the following statements are true:

That on or about December 10, 1993, I was licensed to practice as a physician in the State of New York, and issued License No. 194486 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 #11-38. (Attachment I) (henceforth "Original Order"), which was issued upon an Application For Consent Order signed by me on January 19, 2011, (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:

- a Censure and Reprimand;
- Respondent is permanently restricted from prescribing controlled substances;

- Pursuant to N.Y. Pub. Health Law § 230-a(9), I shall be placed on probation for a period of three (3) years, subject to the terms set forth in attached Exhibit B, and any extension and/or modifications, thereto.
- Respondent shall pay a \$2,500.00 fine, to be paid within thirty (30) days of the effective date of the Consent Order to the NYS Department of Health, Bureau of Accounts Management, Revenue Unit, Empire State Plaza, Corning Tower, Room 1717, Albany, N.Y. 12237-0016.

The sanction imposed shall be modified, as follows:

- Upon this Modification Order's effective date, Respondent's permanent restriction from prescribing controlled substances is terminated and, instead, in addition to the Conditions set forth in the Original Order, Respondent shall be subject to the following Conditions pursuant to N.Y. Pub. Health Law § 230, which shall remain in effect so long as Respondent remains licensed to practice medicine in New York State :
 - Respondent shall comply with all requirements of Article 33 of the Public Health Law and of New York State Department of Health regulations, and shall meet as requested with OPMC to provide proof of compliance.
 - Respondent shall maintain, in a format that is acceptable to OPMC, a log of all ordering, prescribing, administering and/or dispensing of all controlled substances. This log shall include the following information: the drug, the dose, the patient, the diagnosis, the date that the drug was

prescribed, and such other information related to ordering, prescribing, administering and/or dispensing as may be requested by OPMC. This log shall be subject to review by the Director of OPMC, and Respondent shall make this log, and the records of any patient referenced in this log, immediately available to OPMC, upon demand.

- o Respondent shall make available for review by OPMC and/or in OPMC's discretion, by a physician proposed by Respondent and approved, in writing, by the Director of OPMC, complete copies of all medical and office records selected by OPMC. Respondent shall fully cooperate in the review process.

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 4/8/2015



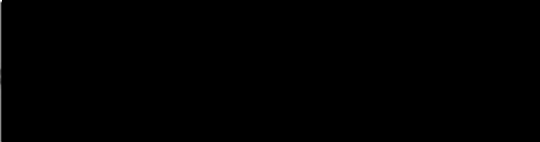
NABIL AHMED ELHADIDY, M.D.
RESPONDENT

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


DATE: 4/10/15


ANTHONY Z. SCHER, ESQ.
Attorney for Respondent

DATE: April 16, 2015


MARCIA E. KAPLAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 4/17/15


KEITH W. SERVIS
Director
Office of Professional Medical Conduct

Modification Order

Attachment I



New York State Board for Professional Medical Conduct

433 River Street, Suite 303 • Troy, New York 12180-2299 • (518) 402-0863

Nirav R. Shah, M.D., M.P.H.
Commissioner
NYS Department of Health
Keith W. Servis, Director
Office of Professional Medical Conduct

Public

Kendrick A. Sears, M.D.
Chair
Carmella Torrelli
Vice Chair
Katherine A. Hawkins, M.D., J.D.
Executive Secretary

February 17, 2011

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Nabil Ahmed Elhadidy, M.D.
200 Kenilworth Avenue
Staten Island, NY 10312

RE: License No. 194486

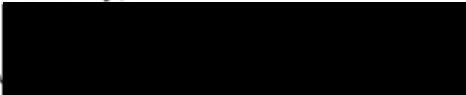
Dear Dr. Elhadidy:

Enclosed is a copy of Order BPMC #11-38 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect February 24, 2011.

If the penalty imposed by the Order is a fine, please write the check payable to the New York State Department of Health. Noting the BPMC Order number on your remittance will assist in proper crediting. Payments should be directed to the following address:

Bureau of Accounts Management
New York State Department of Health
Corning Tower, Room 1717
Empire State Plaza
Albany, New York 12237

Sincerely,


Katherine A. Hawkins, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

cc: Anthony Z. Scher, Esq.
Wood & Scher
222 Bloomingdale Road, Suite 311
White Plains, NY 10605

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

IN THE MATTER
OF
NABIL AHMED ELHADIDY, M.D.

CONSENT
ORDER

BPMC No. #11-38


Upon the application of **NABIL AHMED ELHADIDY, M.D.**, (Respondent), in the attached Consent Agreement, that 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 Consent 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 or email transmission to Respondent or Respondent's attorney, whichever is first.

SO ORDERED.

DATED: 2-17-2011


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

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

IN THE MATTER

OF

NABIL AHMED ELHADIDY, M.D.
CO-09-04-2232-A

CONSENT

AGREEMENT

NABIL AHMED ELHADIDY, M.D., (Respondent), representing that all of the following statements are true, deposes and says:

That on or about December 10, 1993, I was licensed to practice medicine in the State of New York and issued license number 194486 by the New York State Education Department.

My current address is 200 Kenilworth Avenue, Staten Island, NY 10312, and I will advise the Director (Director) of the Office of Professional Medical Conduct (OPMC) of any change of my address within thirty (30) days, thereof.

I understand that the New York State Board for Professional Medical Conduct (Board) 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 Consent Agreement.

I do not contest the one (1) Specification, and agree to the following sanction:

Censure and Reprimand;

Respondent is permanently restricted from prescribing controlled substances;

Pursuant to N.Y. Pub. Health Law § 230-a(9), I shall be placed on probation for a period of three (3) years, subject to the terms set forth in attached Exhibit B, and any extension and/or modifications, thereto.

Respondent shall pay a \$2,500.00 fine, to be paid within thirty (30) days of the effective date of the Consent Order to the NYS Department of Health, Bureau of Accounts Management, Revenue Unit, Empire State Plaza, Corning Tower, Room 1717, Albany, NY 12237-0016.

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

That Respondent shall remain in continuous compliance with all requirements of New York Education Law § 6502 including, but not limited to, the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees. Respondent shall not exercise the option provided in New York Education Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 30 days after the effective date of the Consent Order and will continue so long as Respondent remains a licensee in New York State; and

That Respondent shall cooperate fully with the OPMC in its administration and enforcement of the Consent 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 Consent Agreement. Respondent shall meet with a person designated by the Director, 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 the Consent Order shall constitute misconduct as defined by New York Education Law § 6530(29).

I agree that, if I am charged with professional misconduct in future, this Consent Agreement and the Consent 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 New York 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 the Consent 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 or email transmission to me or my attorney, whichever is first. The Consent Order, this Consent 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 of Health website.

I stipulate that the proposed sanction and Consent Order are authorized by New York Public Health Law §§ 230 and 230-a, and that the Board and OPMC have the requisite powers to carry out all included terms. 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, administratively and/or judicially, I agree to be bound by the Consent Order, and I ask that the Board adopt this Consent Agreement.

I understand and agree that the attorney for the Department, the Director, OPMC, and the Chair of the Board each retain complete discretion either to enter into the proposed Consent Agreement and Consent 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.

AFFIRMED:

DATED: 1/19, 2011


NABIL AHMÉD ELHADIDY, M.D.
Respondent

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

DATE: 1/19, 2011



ANTHONY Z/SCHER
Attorney for Respondent

DATE: 2/10, 2011



MICHAEL G. BASS
Assistant Counsel
Bureau of Professional Medical Conduct

DATE: 2/16, 2011



KEITH W. SERVIS
Director
Office of Professional Medical Conduct

EXHIBIT A

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

IN THE MATTER
OF
NABIL AHMED ELHADIDY, M.D.
CO-09-04-2232-A

STATEMENT
OF
CHARGES

NABIL AHMED ELHADIDY, M.D., Respondent, was authorized to practice medicine in New York state on December 10, 1993, by the issuance of license number 194486 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about June 19, 2007, in the Criminal Court of the City of New York, County of Kings, State of New York, Respondent was found guilty, based on a plea of guilty, of Offering a False Instrument for Filing in the 2nd Degree, in violation of New York State Penal Law Section 175.30, a misdemeanor. On or about October 26, 2007, Respondent was sentenced, inter alia, to a 1 year Conditional Discharge.

SPECIFICATION

Respondent violated New York education Law Sec. 6530(9)(a)(i) by being convicted of committing an act constituting a crime under New York state law, in that Petitioner charges:

1. The facts in paragraph A.

DATED: *November 3*, 2010
Albany, New York


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 N.Y. Educ. Law §§ 6530 or 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to N.Y. Pub. Health Law § 230(19).
2. Respondent shall maintain active registration of Respondent's license (except during periods of actual suspension) with the New York State Education Department Division of Professional Licensing Services, 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 this 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; all current and past affiliations and/or privileges, with hospitals, institutions, facilities, medical practices, managed care organizations, and/or applications for such affiliations and/or privileges; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information.
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 § 171(27); State Finance Law § 18; CPLR § 5001; Executive Law § 32].
6. The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 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 30 day period. Respondent shall then notify the Director again at least 14 days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period shall resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in Exhibit "A" or as are necessary to protect the public health.
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, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.

8. Respondent shall adhere to federal and state guidelines and professional standards of care with respect to infection control practices. Respondent shall ensure education, training and oversight of all office personnel involved in medical care, with respect to these practices.
9. 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.
10. Respondent shall enroll in and complete a continuing education program in the areas of ethics and record keeping. This continuing education program is subject to the Director of OPMC's prior written approval and shall be completed within the first 6 months of the probation period.
11. Respondent shall practice medicine 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. Any medical practice in violation of this term shall constitute the unauthorized practice of medicine.
 - 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 cause the practice monitor to report quarterly, in writing, to the Director of OPMC.

Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC prior to Respondent's practice after the effective date of this Order.

12. Respondent shall comply with this Consent Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a 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.