

March 13, 2012

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Ajoy S. Bhattacharya, M.D.

REDACTED ADDRESS

Re: License No. 230782

Dear Dr. Bhattacharya:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 12-43. This order and any penalty provided therein goes into effect March 20, 2012.

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,

REDACTED SIGNATURE

Katherine A. Hawkins, M.D., J.D.
Executive Secretary

Board for Professional Medical Conduct

Enclosure

cc: James D. Lantier, Esq.
Smith, Sovik, Kendrick & Sugnet
250 South Clinton Street, Suite 600
Syracuse, NY 13202-1252

**IN THE MATTER
OF
AJOY BHATTACHARYA, M.D.**

**CONSENT
ORDER**

Upon the application of AJOY BHATTACHARYA, M.D. (Respondent) 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 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 transmission to Respondent or Respondent's attorney, whichever is first.

SO ORDERED.

DATE: 3/13/2012

REDACTED SIGNATURE

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

**IN THE MATTER
OF
AJOY BHATTACHARYA, M.D.**

**CONSENT
AGREEMENT
AND
ORDER**

AJOY BHATTACHARYA, M.D., represents that all of the following statements are true:

That on or about December 16, 2003, I was authorized to perform medical services as a physician in the State of New York, and issued License No. 230782 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 (Board) has charged me with Sixteen 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 admit to the Sixth Specification, Negligence On More Than One Occasion, and the Factual Allegations set forth therein, in full satisfaction of the charges against me, and agree to the following penalties:

1. My license shall be suspended for a period of five years, with the entire period of the suspension to be stayed.
2. I shall be placed on probation for a period of three years, subject to the terms set forth in attached Exhibit B.

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

That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ 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 N.Y. Educ. Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 120 days after the Consent Order's effective date and will continue so long as Respondent remains a licensee 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 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 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 Consent Order shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

I agree that, if I am charged with professional misconduct in 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 N.Y. Pub. 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 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 transmission to me or my attorney, whichever is first. The Consent 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. OPMC shall report this action to the National Practitioner Data Bank and the Federation of State Medical Boards, and any other entities that the Director of OPMC shall deem appropriate.

I stipulate that the proposed sanction and Consent Order are authorized by N.Y. Pub. 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, whether administratively 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 of OPMC and the Chair of the Board each retain complete discretion either to enter into the proposed 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.

DATE February 28, 2012

REDACTED SIGNATURE

AJOY BHATTACHARYA, M.D.
RESPONDENT

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

DATE: 3/1/12

REDACTED SIGNATURE

JAMES D. LANTIER, ESQ.
Smith, Sovik, Kendrick & Sugnet
Attorneys for Respondent

DATE: 3/4/12

REDACTED SIGNATURE

TIMOTHY J. MAHAR
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 3/12/12

REDACTED SIGNATURE

KEITH W. SERVIS
Director
Office of Professional Medical Conduct

Exhibit A

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

IN THE MATTER
OF
AJOY BHATTACHARYA, M.D.

STATEMENT
OF
CHARGES

Ajoy Bhattacharya, M.D., the Respondent, was authorized to practice medicine in New York State on or about December 16, 2003, by the issuance of license number 230782 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. Respondent provided anesthesia care to Patient A during a laparoscopy with lysis of adhesions procedure performed at the Champlain Valley Physicians Hospital in Plattsburgh, New York on December 17, 2009. Respondent's medical care of Patient A deviated from accepted standards of medical care as follows:
1. Respondent failed to appropriately administer neuromuscular reversing medications to Patient A.
 2. Respondent prematurely and/or inappropriately extubated Patient A.
 3. Respondent failed to appropriately manage Patient A's care in the recovery room.
 4. Respondent failed to maintain an adequate medical record for Patient A.

B. Respondent provided anesthesia care to Patient B during a left knee arthroscopy procedure performed at an ambulatory surgery facility in Plattsburgh, New York on December 11, 2009. Respondent's medical care of Patient B deviated from accepted standards of medical care as follows:

1. Respondent prematurely and/or inappropriately extubated Patient B following the completion of the surgery.
2. Respondent failed to timely and/or adequately treat Patient B's respiratory distress following extubation.
3. Respondent failed to order epinephrine in the treatment of Patient B during a Code.
4. Respondent failed to timely diagnose Patient B's pulmonary edema.
5. Respondent failed to properly manage Patient B's code after she went into respiratory and/or cardiac arrest.
6. Respondent inappropriately delayed the transfer of Patient B to emergency medical services for transport to the hospital.
7. Respondent failed to maintain an adequate medical record for Patient B.

C. Respondent provided anesthesia care to Patient C during a hysteroscopy, D & C, and endometrial ablation procedures performed at Champlain Valley Physician's Hospital on October 13, 2009. Respondent's medical care of Patient C deviated from accepted standards of care as follows:

1. Respondent failed to obtain an adequate consent from Patient C for spinal anesthesia.
2. Respondent failed to obtain a written consent from Patient C for a spinal anesthesia.

3. Respondent failed to maintain an adequate medical record for Patient C.

D. Respondent provided anesthesia care to Patient D during a left forearm AV graft thrombectomy and left upper arm AV graft procedures at Jamaica Hospital Medical Center, Jamaica, New York on November 12, 2007. Respondent's medical care of Patient D deviated from accepted standards of medical care as follows:

1. Respondent failed to adequately manage and/or treat Patient D's signs and symptoms of hypoxia.
2. Respondent failed to maintain an adequate medical record for Patient D.

SPECIFICATION OF CHARGES

FIRST THROUGH FIFTH SPECIFICATIONS

GROSS NEGLIGENCE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(4) by practicing the profession of medicine with gross negligence on a particular occasion as alleged in the facts of the following:

1. The facts as alleged in paragraphs A and A.2.
2. The facts as alleged in paragraphs B and B.1.
3. The facts as alleged in paragraphs B and B.2.
4. The facts as alleged in paragraphs B and B.3.
5. The facts as alleged in paragraphs B and B.6.

SIXTH SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(3) by practicing the profession of medicine with negligence on more than one occasion as alleged in the facts of:

6. The facts as alleged in two or more of the following paragraphs:
A and A.1 and/or A and A.2 and/or A and A.3 and/or A and A.4
and/or B and B.1 and/or B and B.2 and/or B and B.3 and/or
B and B.4 and/or B and B.5 and/or B and B.6 and/or B and B.7
and/or C and C.1 and/or C and C.2 and/or C and C.3 and/or
D and D.1 and/or D and D.2.

SEVENTH THROUGH ELEVENTH SPECIFICATIONS

GROSS INCOMPETENCE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(6) by practicing the profession of medicine with gross incompetence as alleged in the facts of the following:

7. The facts as alleged in paragraphs A and A.2.
8. The facts as alleged in paragraphs B and B.1.
9. The facts as alleged in paragraphs B and B.2.
10. The facts as alleged in paragraphs B and B.3.
11. The facts as alleged in paragraphs B and B.6.

TWELFTH SPECIFICATION

INCOMPETENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(5) by practicing the profession of medicine with incompetence on more than one occasion as alleged in the facts of:

12. The facts as alleged in two or more of the following paragraphs:
A and A.1 and/or A and A.2 and/or A and A.3 and/or A and A.4
and/or B and B.1 and/or B and B.2 and/or B and B.3 and/or
B and B.4 and/or B and B.5 and/or B and B.6 and/or B and B.7
and/or C and C.1 and/or C and C.2 and/or C and C.3 and/or
D and D.1 and/or D and D.2.

THIRTEENTH THROUGH SIXTEENTH SPECIFICATIONS

FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(32) by failing to maintain a record for each patient which accurately reflects the care and treatment of the patient, as alleged in the facts of:

13. The facts as alleged in paragraphs A and A.4.
14. The facts as alleged in paragraphs B and B.7.
15. The facts as alleged in paragraphs C and C.3.
16. The facts as alleged in paragraphs D and D.2.

DATE:

March
February 6, 2012
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 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 1000, 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; 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 actively performing medical services as a physician 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 performance of medical services as a physician ("active 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. Within thirty days of the Consent Order's effective date, Respondent shall perform 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. Respondent's practice of anesthesiology shall be governed by the terms of paragraph 9 below until the completion of the remediation plan described therein, after which the terms of this paragraph will apply to Respondent's practice of anesthesiology. 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 30) 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.
 - d. 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.
9. Respondent shall obtain a clinical competency assessment performed by the Mount Sinai School of Medicine, Department of Anesthesiology, Clinical Competency Assessment Program (hereafter CCA). Respondent shall cause a written report of such assessment to be provided directly to the Director of OPMC within sixty (60) days of the effective date of this Order.
 - a. Respondent shall be responsible for all expenses related to the clinical competency assessment and shall provide to the Director of OPMC proof of full payment of all costs that may be charged. This term of probation shall not be satisfied in the absence of actual receipt, by the Director, of such documentation, and any failure to satisfy shall provide a basis for a Violation of Probation proceeding.
 - b. Respondent's license shall be restricted to prohibit the practice of anesthesiology until such time as Respondent has fully cooperated with and has successfully completed the CCA. If Respondent successfully completes the CCA, Respondent's license shall be

limited to permit the practice of anesthesiology only to the extent necessary to complete the remediation plan described below under the supervision of a Preceptor. If Respondent successfully completes the remediation plan, his license shall be governed by the remaining terms of Exhibit B (Probation Terms) for the balance of the probation period.

10. At the direction of the Board and within 60 days following the completion of the CCA, the Respondent shall identify a Preceptor, a physician who is board certified in the same specialty, to be approved in writing, by the Director of OPMC. The Respondent shall cause the Preceptor to:
 - a. Develop and submit to the Director of OPMC for written approval a remediation plan, which addresses the deficiencies /retraining recommendations identified in the CCA. Additionally, this proposal shall establish a timeframe for completion of the remediation program.
 - b. Submit progress reports at periods identified by OPMC certifying whether the Respondent is fully participating in the personalized continuing medical education program and is making satisfactory progress towards the completion of the approved remediation plan.
 - c. Report immediately to the Director of OPMC if the Respondent withdraws from the program and report promptly to OPMC any significant pattern of non-compliance by the Respondent.
 - d. At the conclusion of the program, submit to the Director of OPMC a detailed assessment of the progress made by the Respondent toward remediation of all identified deficiencies.

Respondent shall be solely responsible for all expenses associated with these terms, including fees, if any, for the clinical competency assessment, the personalized continuing medical education program, or to the monitoring physician.

11. 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.
12. 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.
13. Respondent, during the period of probation, shall complete a total of 150 hours of Category I Continuing Medical Education (CME). Said CME shall include courses in all of the following areas: Anesthesiology, medical records and communication with physicians and nurses. All CME courses are subject to the prior written approval of OPMC. Said 150 hours of CME shall be in addition to any other CME that Respondent may be required to complete to satisfy the remediation plan set up by the Preceptor, or licensure in any jurisdiction, or privileges in any facility.
14. 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.