

Public

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

IN THE MATTER
OF
ROBERT CATTANI, M.D.

COMMISSIONER'S
ORDER AND
NOTICE OF
HEARING

TO: ROBERT CATTANI, M.D.
450 Slosson Avenue
Staten Island, NY 10314

The undersigned, Nirav R. Shah, M.D., M.P.H., Commissioner of Health, after an investigation, upon the recommendation of a Committee on Professional Medical Conduct of the State Board for Professional Medical Conduct, and upon the Statement of Charges attached hereto and made a part hereof, has determined that the continued practice of medicine in the State of New York by ROBERT CATTANI, M.D., the Respondent, constitutes an imminent danger to the health of the people of this state.

It is therefore:

ORDERED, pursuant to N.Y. Pub. Health Law §230(12), that effective immediately ROBERT CATTANI, M.D., Respondent, shall not practice medicine in the State of New York. This Order shall remain in effect unless modified or vacated by the Commissioner of Health pursuant to N.Y. Pub. Health Law §230(12).

PLEASE TAKE NOTICE that a hearing, already in progress, will continue pursuant to the provisions of N.Y. Pub. Health Law §230, and N.Y. State Admin. Proc. Act §§301-307 and 401. The hearing will be conducted before a committee on professional conduct of the State Board for Professional Medical Conduct, at the offices of the New York State Health Department, 90 Church Street, 4th Floor, New York, NY 10007, at such adjourned dates, times and places as the committee may direct.

At the hearing, evidence will be received concerning the allegations set forth

in the Statement of Charges, which is attached. A stenographic record of the hearing will be made and the witnesses at the hearing will be sworn and examined. The Respondent shall appear in person at the hearing and may be represented by counsel. The Respondent has the right to produce witnesses and evidence on his behalf, to issue or have subpoenas issued on his behalf for the production of witnesses and documents and to cross-examine witnesses and examine evidence produced against him. A summary of the Department of Health Hearing Rules is enclosed. Pursuant to §301(5) of the State Administrative Procedure Act, the Department, upon reasonable notice, will provide at no charge a qualified interpreter of the deaf to interpret the proceedings to, and the testimony of, any deaf person.

The hearing will proceed whether or not the Respondent appears at the hearing. Scheduled hearing dates are considered dates certain and, therefore, adjournment requests are not routinely granted. Requests for adjournments must be made in writing to the New York State Department of Health, Division of Legal Affairs, Bureau of Adjudication, Hedley Park Place, 433 River Street, Fifth Floor South, Troy, NY 12180, ATTENTION: HON. DAVID LENIHAN, ADMINISTRATIVE OFFICER, BUREAU OF ADJUDICATION, and by telephone (518-402-0748), upon notice to the attorney for the Department of Health whose name appears below. Claims of court engagement will require detailed affidavits of actual engagement. Claims of illness will require medical documentation.

At the conclusion of the hearing, the committee shall make findings of fact, conclusions concerning the charges sustained or dismissed, and, in the event any of the charges are sustained, a determination of the penalty or sanction to be imposed or appropriate action to be taken. Such determination may be reviewed by the administrative review board for professional medical conduct.

THESE PROCEEDINGS MAY RESULT IN A DETERMINATION THAT YOUR LICENSE TO PRACTICE MEDICINE IN NEW YORK STATE BE REVOKED OR SUSPENDED, AND/OR THAT YOU BE FINED OR SUBJECT TO OTHER SANCTIONS SET FORTH IN NEW YORK PUBLIC HEALTH LAW §230-a. YOU ARE URGED TO OBTAIN AN ATTORNEY TO REPRESENT YOU IN THIS MATTER.

DATED: Albany, New York
December 6, 2011

REDACTED SIGNATURE

Nirav R. Shah, M.D., M.P.H.
Commissioner of Health
New York State Health Department

Inquiries should be directed to:

Dianne Abeloff
Associate Counsel
N.Y.S. Department of Health
Division of Legal Affairs
90 Church Street - 4th Floor
New York, NY 10007

These charges are only allegations which may be contested by the licensee in an administrative hearing.

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

IN THE MATTER
OF
ROBERT CATTANI, M.D.

STATEMENT
OF
CHARGES

ROBERT CATTANI, M.D., the Respondent, was authorized to practice medicine in New York State on or about July 1, 1968, by the issuance of license number 101545 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. From or on or about August 5, 2010, through on or about August 17, 2010, Respondent treated Patient A. (The identity of the patients appears in the Appendix.) On or about August 17, 2010, Respondent performed, in his office, liposuction of the trunk and extremities, excision of gynecomastia and lower abdominoplasty on Patient A. Approximately 3 hours after surgery, Patient A became hypotensive and tachycardic. Patient A was eventually transferred to Staten Island University Hospital in impending renal failure, with a progressively dropping hematocrit and a severe leukocytosis. Respondent's care and treatment of Patient A deviated from accepted medical standards, in that he:
1. Performed an abdominoplasty which was not medically indicated for this patient;
 2. Failed to recognize and appropriately treat life threatening blood loss under the abdominal skin flap;
 3. Failed to transfer the patient to the hospital in a timely manner;

4. Prevented EMS from assisting a patient in need of emergency care;
 5. Failed to accurately record the condition of the patient in the records and/or the care and treatment rendered.
- B. From in or about September 8, 2006, to in or about March 26, 2007, Respondent treated Patient B. On or about September 20, 2006, Respondent performed an abdominoplasty. On or about March 20, 2007, Respondent performed liposuction of the abdomen and revision of the post-operative scar of the abdomen. Respondent's care and treatment of Patient B deviated from accepted medical standards, in that he:
1. Failed to recognize and timely treat a fecal fistula due to iatrogenic perforation created during the March 20th liposuction;
 2. Failed to accurately record the condition of the patient in the patient's chart and/or the care and treatment rendered.
- C. In or about July 2005, Respondent treated Patient C. On or about July 26, 2005, Respondent performed a blepharoplasty and face lift on Patient C. After the procedure, Patient C permanently lost the sight in her right eye. Respondent's care and treatment of Patient C deviated from accepted medical standards, in that he:
1. Prematurely discharged Patient C home from his recovery room;
 2. Failed to recognize and appropriately treat Patient C's emergent compartment syndrome/retrobulbar hematoma;
 3. Failed to possess the necessary knowledge and skill to immediately decompress the occipital orbit when performing a

procedure which incises the orbital septum;

4. Failed to accurately record the condition of the patient in the patient's chart and/or the care and treatment rendered.

D. From in or about February 15, 2010, to in or about April 2, 2010, Respondent treated Patient D. On or about March 2, 2010, Respondent removed the patient's existing breast implants and implanted new, 750 cc implants. Patient B developed an infection and Respondent removed the new implants on April 2, 2010. Respondent's care and treatment of Patient D deviated from accepted medical standards in that he:

1. Failed to provide timely post-operative examination of Patient D after the March 2nd procedure;
2. Failed to timely diagnose and appropriately treat the wound infection and abscess;
3. Failed to accurately record the condition of the patient in the patient's chart and/or the care and treatment rendered.

E. From in or about October 15, 2005, through in or about March 26, 2007, Respondent treated Patient E. On or about November 16, 2005, Respondent removed the patient's existing breast implants and replaced them with new, larger implants. Respondent's care and treatment deviated from accepted medical standards in that he:

1. Performed breast augmentation, a procedure that was not indicated, and failed to perform a mastopexy, the procedure that was indicated.

SPECIFICATION OF CHARGES

FIRST THROUGH FIFTH SPECIFICATION

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. Paragraph A and its subparagraphs;
2. Paragraph B and its subparagraphs;
3. Paragraph C and its subparagraphs;
4. Paragraph D and its subparagraphs;
5. Paragraph E and its subparagraphs.

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 two or more of the following:

6. Paragraph A and its subparagraphs; Paragraph B and its subparagraphs; Paragraph C and its subparagraphs; Paragraph D and its subparagraphs; and/or Paragraph E and its subparagraphs.

SEVENTH 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 two or more of the following:

7. Paragraph A and its subparagraphs; Paragraph B and its subparagraphs; Paragraph C and its subparagraphs; Paragraph D and its subparagraphs; and/or Paragraph E and its subparagraphs.

EIGHTH THROUGH TWELFTH SPECIFICATION

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:

8. Paragraph A and A (5);
9. Paragraph B and B (2);
10. Paragraph C and C (4);
11. Paragraph D and D (3).

DATE: November 2, 2011
New York, New York

REDACTED SIGNATURE

ROY NEMERSON
Deputy Counsel
Bureau of Professional Medical Conduct