**NEW YORK** state department of

Howard A. Zucker, M.D., J.D. Acting Commissioner of Health

HEALTH

Sue Kelly **Executive Deputy Commissioner** 

September 23, 2014

### CERTIFIED MAIL-RETURN RECEIPT REQUESTED

James P. Cavanagh, M.D. REDACTED

Re: License No. 210488

Dear Dr. Cavanagh:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Modification Order No. 14-236. This order and any penalty provided therein goes into effect September 30, 2014.

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

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

Enclosure

cc:

Paul Walker, Esq. Care of DOPF, P.C. 440 Ninth Avenue, 16th Floor New York, NY 10001

> **HEALTH.NY.GOV** facebook.com/NYSDOH twitter.com/HealthNYGov

### IN THE MATTER

MODIFICATION

OF

ORDER

### JAMES P. CAVANAGH, M.D.

Upon the proposed Application for a Modification Order of JAMES P. CAVANAGH, M.D. (Respondent), that is made a part of this Modification Order, it is agreed and

ORDERED, that the attached Application and its terms, are adopted 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 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.

DATE: 9/22/14

REDACTED

Arthur S. Hengerer, 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

# JAMES P. CAVANAGH, M.D.

APPLICATION FOR A MODIFICATION ORDER

JAMES P. CAVANAGH, M.D., represents that all of the following statements are true:

That on or about June 2, 1988, I was licensed to practice as a physician in the State of New York, and issued License No. 210488 by the New York State Education Department.

My current address is \_\_\_ REDACTED

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 No. 12-190 (Attachment I) (henceforth "Original Order"), which went into effect on September 26, 2012, and which was issued upon an Application For Consent Order signed by me on September 17, 2012 (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, as follows:

Pursuant to N.Y. Pub. Health Law § 230-a(2), my license to practice medicine in New York State shall be suspended for a period of one year, with such period of suspension to be entirely stayed.

Pursuant to N.Y. Pub. Health Law §§ 230-a(7) and (9), I shall be subject to a fine in the amount of \$20,000, \$10,000 to be paid within 30 days, \$10,000 to be paid within 90 days of the effective date of this Order. Payments must be submitted to:

Bureau of Accounts Management
New York State Department of Health
Empire State Plaza
Corning Tower, Room 2784
Albany, New York 12237

Pursuant to N.Y. Pub. Health Law § 230-a)(9), I shall be placed on probation for a period of 60 months, subject to the terms set forth in attached Exhibit "B." Six months prior to the termination of probation Respondent, at the direction of the Director of the Office of Professional Medical Conduct, (Director) shall submit to a psychiatric evaluation by a physician approved by the Director. The Director may, based upon said evaluation and at his discretion, extend the period of probation for an additional 24 months. (Underlining added.)

The sanction imposed in the Original Order shall be modified to strike the entirety of the underlined portion set forth above.

and

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

By making this Application, I assert that, by choice, I currently practice medicine in New York State exclusively in a hospital setting. As a condition of the Modification Order for which I apply, should I, in the future, determine to commence medical practice in New York State outside of a hospital setting, I shall, prior to commencing such practice, provide 30 days advance notice, in writing, to the Director of OPMC. I may commence such practice after I receive the Director's written acknowledgment that this condition has been satisfied, and I agree to be subject to any further conditions the Director may impose as relate to the original Consent Order and/or any circumstances or information known to the Director at the time I provide notice of my determination to commence medical practice in New York State outside of a hospital setting. By making this Application, I stipulate that the Director is authorized, in the exercise of his sole discretion, to impose whatever further conditions the Director shall deem appropriate, and I further stipulate that my failure to comply with such conditions shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

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.

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 9/18/14

REDACTED

JAMES P. CAVANAGH, M.D. RESPONDENT

5

The undersigned agree to Respondent's attached Application for a Modification Order and to its proposed penalty, terms and conditions

DATE: 5881. 19, 2014

REDACTED

PAUL WALKER, PSQ. Attorney for Respondent

DATE: 5ept. 19,2014

REDACTED

MARCIA E. KAPLAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 9/19/14

REDACTED

KEITH W. SERVIS Director Office of Professional Medical Conduct ATTACHMENT I

NEW YORK
state department of
HEALTH

Public

Nirav R. Shah, M.D., M.P.H. Commissioner

Sue Kelly Executive Deputy Commissioner

September 19, 2012

### CERTIFIED MAIL-RETURN RECEIPT REQUESTED

James P. Cavanagh, M.D. REDACTED

RE:

License No. 210488

Dear Dr. Cavanagh:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 12-190. This Order and any penalty provided therein goes into effect September 26, 2012.

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 2784 Empire State Plaza Albany, New York 12237

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

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

cc: Paul Walker, Esq. Peltz & Walker 222 Broadway New York, NY 10038

> HEALTH.NY.GOV facebook.com/NYSDOH twitter.com/HealthNYGov

BPMC No. 12-190

### IN THE MATTER

OF

JAMES P. CAVANAGH, M.D.

CONSENT

ORDER

Upon the application of (Respondent) JAMES P. CAVANAGH, M.D. 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 jurther

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.

SC ORDERED

DATE 9/18/2012

REDACTED

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

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

# OF JAMES P.CAVANAGH, M.D.

CONSENT AGREEMENT AND ORDER

JAMES P. CAVANAGH, M.D., represents that all of the following statements are true:

That on or about June 2, 1998, I was licensed to practice as a physician in the State of New York, and issued License No. 210488, by the New York State Education Department.

My current address is REDACTED

and I will advise the

Director of the Office of Professional Medical Conduct of any change of address.

Lunderstand that the New York State Board for Professional Medical

Conduct (Board) has charged me with one specification of professional misconduct, as set forth in a Statement of Charges, marked as Exhibit "A", attached to and part of this

Consent Agreement.

I do not contest the charge, in full satisfaction of the charges against me, and agree to the following penalty:

Pursuant to N.Y. Pub. Health Law § 230-a(2), my license to practice medicine in New York State shall be suspended for a period of one year, with such period of suspension to be entirely stayed.

Pursuant to N.Y. Pub. Health Law §§ 230-a(7) and (9), I shall be subject to a fine in the amount of \$20,000, \$10,000 to be paid within 30 days, \$10,000 to be paid within 90 days of the effective date of this Order. Payments must be submitted to:

Bureau of Accounts Management

New York State Department of Health

Empire State Plaza

Corning Tower, Room 2784

Albany, New York 12237

Pursuant to N.Y. Pub. Health Law § 230-a(9), I shall be placed on probation for a period of 60 months, subject to the terms set forth in attached Exhibit "B." Six months prior to the termination of probation Respondent, at the direction of the Director of the Office of Professional Medical conduct, (Director) shall submit to a psychiatric evaluation by a physician approved by the Director The Director may, based upon said evaluation and at his discretion, extend the period of probation for an additional 24 months.

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).

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.

l 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.

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.

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 9/17/12

REDACTED

JAMES P. CAVANAGH, M.D. RESPONDENT

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

DATE: S/29/20/2

REDACTED

PAUL WALKER, ESQ.
Attorney for Respondent

REDACTED

JEAN BRESLER
Associate Counsel
Bureau of Professional Medical Conduct

DATE: Leg 18, 20/2

REDACTED

JEAN BRESLER
Associate Counsel
Bureau of Professional Medical Conduct

Office of Professional Medical Conduct

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

IN THE MATTER

STATEMENT

OF

OF

JAMES P. CAVANAGH, M.D.

CHARGES

JAMES P. CAVANAGH, M.D., the Respondent, was authorized to practice medicine in New York. State on or about June 2, 1998, by the issuance of license number 210488 by the New York State Education Department.

### FACTUAL ALLEGATIONS

A. In his medical office in Huntington, NY, Respondent engaged in inappropriate conduct with the mothers of the patients, as identified in attached Appendix, on more than one occasion between 2009 and 2010

### SPECIFICATION OF CHARGES

### FIRST 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 Paragraph A.

DATE: August 3, 2012 New York, New York

REDACTED

Roy Nemerson
Deputy Counsel
Bureau of Professional Medical Conduct

Exhibit "A"

### 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).
- 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.
- Respondent shall provide the Director, Office of Professional Medical Conduct (CPMC), Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Riverview Center, 150 Broadway, Suite 354, Albany, New York 12204-2719, 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.
- 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].
- 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.

- The probation period shall also toll at any time that Respondent's medical practice in New York State is entirely hospital based. At the time of this application, Respondent's New York State medical practice is, in fact, hospital based, and the terms of probation will toll immediately. Respondent shall provide 30 days advance, written notice to the Director, of any return to New York State Medical practice outside a hospital setting and shall not begin such practice unless and until the terms set forth in paragraph #11 below are met.
- 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.
- 9) 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.
- 10) 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.

### CHAPERONE

- 11) Respondent shall, in the course of practicing medicine in New York State, examine and/ treat any patient only in the presence of a chaperone. The chaperone shall be a licensed or registered health care professional or other health care worker, shall not be a family member, personal friend, or be in a professional relationship with Respondent which could pose a conflict with the chaperone's responsibilities. The chaperone shall be proposed by Respondent and subject to the written approval of the Director of OPMC.
  - a) Prior to the approval of any individual as chaperone, Respondent shall cause the proposed chaperone to execute and submit to the Director of OPMC an acknowledgment of the chaperone's agreement to undertake all of the responsibilities of the role of chaperone. Said acknowledgment shall be made upon a form provided by and acceptable to the Director. Respondent shall provide the chaperone with a copy of the Order and all

of its attachments and shall, without fail, cause the approved chaperone to:

- Report quarterly to OPMC regarding the chaperoning of Respondent's practice.
- ii) Report within 24 hours any failure of Respondent to comply with the Order, including, but not limited to, any failure by Respondent to have the chaperone present when required, any sexually suggestive or otherwise inappropriate comments by Respondent, and any actions of a sexual nature by Respondent.
- iii) Confirm the chaperone's presence at each and every examination and treatment of any patient by Respondent, by placing the chaperone's name, title and date in the patient record for each and every visit, and by maintaining a separate log, kept in the chaperone's own possession, listing the patient name and date of visit for each and every patient visit chaperoned.
- iv) Provide copies of the log described in paragraph b, above, to OPMC at least quarterly and also immediately upon the Director's request.
- 12) Respondent shall enroll in and successfully complete a continuing education program in the area of medical ethics and professional boundaries. This continuing education program is subject to the Director of OPMC's prior written approval and shall be successfully completed within the first 90 days of the probation period.
- 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.