



**Department
of Health**

ANDREW M. CUOMO
Governor

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

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

August 24, 2016

Neelam Taneja Uppal, M.D.
[REDACTED]

Neelam Taneja Uppal, M.D.
Fort Tryon Rehab & HC
801 W. 190th Street
New York, New York 10040

Neelam Taneja Uppal, M.D.
[REDACTED]

Neelam Taneja Uppal, M.D.
5840 Park Boulevard
Pinellas Park, Florida 33781

Timothy J. Mahar, Esq.
NYS Department of Health
Corning Tower Room 2438
Empire State Plaza
Albany, New York 12237

RE: In the Matter of Neelam Taneja Uppal, M.D.

Dear Parties:

Enclosed please find a corrected page 2 for the Determination and Order (No.16-283) of the Hearing Committee in the above referenced matter, which was mailed out on August 16, 2016. Please replace your original copy with the page 2 attached.

Sincerely,

[REDACTED]

James F. Horan
Chief Administrative Law Judge
Bureau of Adjudication

JFH:cah

Enclosure



Department of Health

ANDREW M. CUOMO
Governor

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

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

August 16, 2016

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Neelam Taneja Uppal, M.D.
[REDACTED]

Neelam Taneja Uppal, M.D.
Fort Tryon Rehab & HC
801 W. 190th Street
New York, New York 10040

Neelam Taneja Uppal, M.D.
[REDACTED]

Neelam Taneja Uppal, M.D.
5840 Park Boulevard
Pinellas Park, Florida 33781

Timothy J. Mahar, Esq.
NYS Department of Health
Corning Tower Room 2438
Empire State Plaza
Albany, New York 12237

RE: In the Matter of Neelam Taneja Uppal, M.D.

Dear Parties:

Enclosed please find the Determination and Order (No.16-283) of the Hearing Committee in the above referenced matter. This Determination and Order shall be deemed effective upon the receipt or seven (7) days after mailing by certified mail as per the provisions of §230, subdivision 10, paragraph (h) of the New York State Public Health Law.

As prescribed by the New York State Public Health Law §230, subdivision 10, paragraph (i), (McKinney Supp. 2015) and §230-c subdivisions 1 through 5, (McKinney Supp. 2015), "the determination of a committee on professional medical conduct may be reviewed by the Administrative Review Board for professional medical conduct." Either the Respondent or the Department may seek a review of a committee determination.

All notices of review must be served, by certified mail, upon the Administrative Review Board and the adverse party within fourteen (14) days of service and receipt of the enclosed Determination and Order.

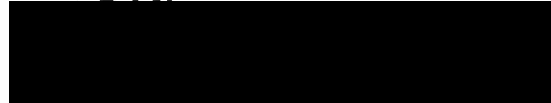
The notice of review served on the Administrative Review Board should be forwarded to:

James F. Horan, Esq., Chief Administrative Law Judge
New York State Department of Health
Bureau of Adjudication
Riverview Center
150 Broadway – Suite 510
Albany, New York 12204

The parties shall have 30 days from the notice of appeal in which to file their briefs to the Administrative Review Board. Six copies of all papers must also be sent to the attention of Mr. Horan at the above address and one copy to the other party. The stipulated record in this matter shall consist of the official hearing transcript(s) and all documents in evidence.

Parties will be notified by mail of the Administrative Review Board's Determination and Order.

Sincerely,



James F. Horan
Chief Administrative Law Judge
Bureau of Adjudication

JFH: nm

Enclosure

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

COPY

IN THE MATTER
OF
NEELAM TANEJA UPPAL, M.D.

DETERMINATION
AND
ORDER

BPMC No. 16-283

A hearing was held on June 16, 2016, at the offices of the New York State Department of Health ("Department").¹ Pursuant to § 230(10)(e) of the Public Health Law ("PHL"), MOHAMMAD-REZA GHAZI-MOGHADAM, M.D., Chairperson, PAUL J. LAMBIASE, and RAVINDER MAMTANI, M.D., duly designated members of the State Board for Professional Medical Conduct, served as the Hearing Committee in this matter. DAWN MacKILLOP-SOLLER served as the ADMINISTRATIVE LAW JUDGE ("ALJ").

The Department appeared by Timothy Mahar, Esq. A Notice of Hearing and Statement of Charges dated April 5, 2016, and April 6, 2016, respectively, were served upon Neelam Taneja Uppal, M.D. ("Respondent").² Respondent appeared *pro se* and testified on her own behalf at the hearing. The Hearing Committee received and examined documents from the Department and a stenographic reporter prepared a transcript of the proceeding. After consideration of the entire record, the Hearing Committee unanimously votes 3-0 to sustain the charges that Respondent committed professional misconduct, in violation of Education Law ("Educ. Law") §§ 6530(9)(b), 6530(9)(d), 6530(2), and

¹ The location of the hearing was 150 Broadway, Suite 510, Menands, New York. The references in brackets refer to exhibits ["Ex."] or transcript page numbers ["T."].

² After several attempts at personal service at both the Respondent's registered address and an additional address the Department had for Respondent, the Department sent the Notice of Hearing and Statement of Charges by certified mail, establishing service pursuant to PHL § 230(10)(d)(i). As such, at the hearing, the ALJ found that jurisdiction was established. [Ex. 2; Appendix II].

6530(21), such that the penalty of Censure and Reprimand with two years' probation, with conditions, is appropriate.

PROCEDURAL HISTORY

Dates Charges Served:	April 14, 2016
Date of Answer to Charges:	May 9, 2016
Hearing Date:	June 16, 2016
Location of Hearing:	New York State Department of Health 150 Broadway, Suite 510 Albany, New York 12204
Witness for the Department:	None
Witness for Respondent:	Respondent
Deliberations Held:	June 16, 2016
Transcript Received:	July 13, 2016

STATEMENT OF THE CASE

The State Board for Professional Medical Conduct functions pursuant to PHL § 230 as a duly authorized professional disciplinary agency of the state of New York. This case is based on a Final Order from the Florida Board of Medicine ("Florida Board") dated January 7, 2015, finding Respondent guilty of professional misconduct in her failure to adequately maintain patients' medical records and inappropriate patient care and prescription practices. The Department charged that Respondent committed professional misconduct pursuant to Educ. Law § 6530(9)(b), by "having been found guilty of professional misconduct by a duly authorized professional disciplinary agency of another state where the conduct upon which the finding was based would, if committed in New

York state, constitute professional misconduct under the laws of New York state." The Department also alleged that Respondent committed professional misconduct under Educ. Law § 6530(d), by "having (her) license to practice medicine revoked, suspended or having other disciplinary action taken..." where the conduct resulting in the disciplinary action taken against her license to practice medicine would, if committed in the state of New York, constitute professional misconduct under the laws of the state of New York. The Department's charges include that had Respondent's conduct occurred in New York, it would have constituted a failure to maintain an adequate medical record, as defined in Educ. Law § 6530(32), the practice of medicine with negligence on more than one occasion, as defined in Educ. Law § 6530(3), and practicing medicine with gross negligence on a particular occasion, as defined in Educ. Law § 6530(4).

The Department also charges that in a renewal application submitted to the New York State Education Department, Respondent falsely answered "no" and "intentionally made a false answer" to a question asking whether she had been "censured, reprimanded or otherwise disciplined" by "any licensing or disciplinary authority" since the time of her last registration application, which constitutes practicing the profession of medicine fraudulently, as defined in Educ. Law § 6530(2), and willfully making or filing a false report, as defined in Educ. Law § 6530(21). [Ex. 1, 4].

FINDINGS OF FACT

The Findings of Fact were made by the Hearing Committee after a review of the record in this matter. Under PHL § 230(10), the Department had the burden of proving its case by a preponderance of the evidence. The following findings and conclusions are the unanimous determinations of the Hearing Committee:

1. Neelam Taneja Uppal, M.D., the Respondent, was licensed to practice medicine in New

York on January 3, 1991, by the issuance of license number 184610 by the Education Department.
[Ex. 1, 3].

2. In a Final Order dated June 7, 2015, the Florida Board found Respondent guilty of professional misconduct, in the form of medical malpractice, in the care and treatment she rendered to three patients within the timeframe of 2008 and 2011, in violation of Florida law. [Ex. 1, 4, 8, 9].

3. In reviewing the medical records pertaining to the three patients, which were maintained by the Respondent, the Florida Board found that they failed to demonstrate treatment rationales indicating sound clinical judgments, vital signs, histories, physical assessments, and communications between the patients' outside healthcare providers. The Florida Board's specific findings also included Respondent's failure to perform physical examinations and testing, properly monitor patients for effects of prescribed drugs and whether such drugs were medically necessary, and render proper diagnoses. [Ex. 4].

4. In addition to these findings of inadequate care, treatment, and record-keeping with respect to her patients, the Florida Board found that Respondent failed to maintain parts of the records of patients seen by her between 2008 and 2011, including progress notes, resulting in missing records within that timeframe. [Ex. 4].

5. The Florida Board imposed the penalties of suspension for six months, followed by physician monitoring and two years' of probation with supervision by a board certified physician, payment of a \$10,000.00 fine, completion of a course in medical records through the Florida Medical Association and five hours of a continuing medical education course in ethics. [Ex. 1, 4].

6. In a New York State medical license renewal application dated January 5, 2016, Respondent intentionally answered falsely, by stating "no," to a question asking whether she had been "revoked...suspended, placed on probation...or fined censured, reprimanded or otherwise

disciplined" by "any licensing or disciplinary authority" since the time of her most recent medical license registration application. [Ex. 1, 7].

APPLICABLE LAW

1. Florida Statute § 458.331(1)(t) provides that "[m]edical malpractice shall not be construed to require more than one instance, event, or act." [Ex. 8].
2. Florida Statute § 456.50(2)(g) defines medical malpractice. It states, in pertinent part, the following:

'Medical malpractice' means the failure to practice medicine in accordance with the level of care, skill, and treatment recognized in general law related to health care licensure. [Ex. 9].
3. Incidents of repeated medical malpractice are defined in Florida Statute § 456.20(2)(h) as "three or more incidents of medical malpractice found to have been committed by a medical doctor." [Ex. 9].
4. A basis for disciplinary action for improper prescription practices is stated in Florida Statute § 458.331(1)(q). It provides:

Prescribing, dispensing, administering, mixing, or otherwise preparing a legend drug, including any controlled substance, other than in the course of the physician's professional practice. For the purposes of this paragraph, it shall be legally presumed that prescribing, dispensing, administering, mixing, or otherwise preparing legend drugs, including controlled substances, inappropriately or in excessive or inappropriate quantities is not in the best interest of the patient and is not in the course of the physician's professional practice, without regard to his or her intent. [Ex. 8].

5. A basis for disciplinary action for inadequate record keeping is stated in Florida Statute § 458.331(1)(m). It states:

Failing to keep legible, as defined by department rule in consultation with the board, medical records that identify the licensed physician or the physician extender and supervising physician by name and professional title who is or are responsible for rendering, ordering, supervising, or billing for each diagnostic or treatment procedure and that justify the course of treatment of the patient, including, but not limited to, patient histories; examination results; test results; records of drugs prescribed, dispensed, or administered; and reports of consultations and hospitalizations. [Ex. 8].

VOTE OF THE HEARING COMMITTEE

FIRST SPECIFICATION

The Hearing Committee determined that the evidence supports sustaining the charge of having committed misconduct under Educ. Law § 6530(9)(b).

VOTE: Sustained (3-0)

SECOND SPECIFICATION

The Hearing Committee concluded that the evidence supports sustaining the charge of having committed misconduct as defined in Educ. Law § 6530(9)(d).

VOTE: Sustained (3-0)

THIRD SPECIFICATION

The Hearing Committee determined that the evidence supports sustaining the charge of having committed misconduct under Educ. Law § 6530(2).

VOTE: Sustained (3-0)

FOURTH SPECIFICATION

The Hearing Committee determined that the evidence supports sustaining the charge of having committed misconduct under Educ. Law § 6530(21).

VOTE: Sustained (3-0)

CONCLUSIONS OF LAW

The Department's evidence demonstrated that in the care rendered to her patients that are the subject of the Florida Board's Final Order, Respondent improperly prescribed antibiotics and other drugs, performed incomplete physical examinations, and failed to properly monitor patients to determine the effectiveness of drugs. In one of the cases where a 16 year-old patient was diagnosed

with Methicillin-resistant *Staphylococcus aureus* ("MRSA"), which can have serious health complications to the nervous system, heart, and other organs, Respondent failed to properly render care to skin lesions, including ordering cultures, or administer appropriate antibiotic therapies to treat the infection. In a separate case, Respondent inappropriately prescribed treatments and drugs for systemic candidiasis and immune dysfunction when the testing did not confirm the diagnoses. New York, like Florida, requires physicians rendering care to patients and prescribing drugs to record patient histories and vital signs, perform physical assessments, properly diagnose conditions, and prescribe appropriate treatments and testing. The Hearing Committee considered the purpose behind these requirements is to keep patients safe from harm. [Ex. 4, 8, 9].

The Department's evidence also showed that Respondent failed to document in her patients' medical records communications between providers, vital signs, conditions or problems, and rationales for drug choices. In addition to these failures, in two of the cases, Respondent admitted to missing medical records, including progress notes containing medical histories, physical exams and prescribed medications. Like Florida, New York requires physicians to record rationales for drug choices and treatments, results of physical evaluations, and effectiveness of prescribed drugs or whether prescriptions for drugs are necessary. Also, in New York, Respondent is obligated to maintain her patients' medical records for "at least" six-years. Since some of the treatment that is the subject of the Florida Board's Final Order occurred between 2009 and 2011, all of the patient medical records not adequately maintained and missing pertaining to that timeframe were within six years of the Florida Board's 2015 Final Order. The purpose in proper medical record keeping is to apprise outside providers of important healthcare information, including treatment plans, prescribed medications, and outcomes of patient evaluations. [Educ. Law § 6530(32); Ex. 4, 8, 9].

In the first and second specifications charged by the Department, Respondent was charged with misconduct, under the definitions of Educ. Law §§ 6530(9)(b) and (9)(d), as a result of her professional misconduct, including improper prescription practices and acts of medical malpractice in Florida, which led to the Florida Board imposing disciplinary action on her medical license. The Hearing Committee sustains those charges. Respondent's failures and omissions, had they occurred in New York, would have constituted negligence on more than one occasion, gross negligence, and a failure to maintain adequate medical records, as defined in Educ. Law §§ 6530(3), 6530(4) and 6530(32), respectively. [Ex. 4, 8, 9].

In the third and fourth specifications charged by the Department, Respondent was charged with professional misconduct, under the definitions of Educ. Law §§ 6530(2) and 6530(21), resulting from her false answer of "no," which she made intentionally, in response to a question on her medical license renewal application asking whether "any licensing or disciplinary authority" had ever "revoked...suspended, [or] placed on probation" her professional license or subjected her to a fine, censure, reprimand, or other discipline. [Ex. 1, 7].

To sustain a charge of fraudulent practice under Educ. Law § 6530(2), the Department must show that there was a false representation made by the licensee which should have been disclosed, that the licensee knew the representation was false, and that the licensee intended to mislead through the false representation, which can be inferred from the circumstances of a particular case. To prove the filing of a false report pursuant to 6530(21), the Department must show that the licensee "willfully" made or filed a false report. Here, in a medical license renewal application dated January 5, 2016, pertaining to renewal period April 1, 2016 through March 31, 2018, Respondent answered "no" to question number two, which states:

Since your last registration application, has any licensing or disciplinary authority revoked, annulled, cancelled, accepted surrender of,

suspended, placed on probation, or refused to issue or renew a professional license or certificate held by you now or previously, or fined, censured, reprimanded or otherwise disciplined you? [Ex. 7].

Although the Florida Board's Final Order dated January 7, 2015, imposed upon Respondent disciplinary penalties, including suspension, a fine, and probation, Respondent argued at hearing, that the Florida Board's order is not "final" due to a pending "appeal" and "[u]ntil the appeal's concluded," she is not required to "report it." Despite never fulfilling any of the requirements under the order, Respondent argued that her Florida medical license is still "active" because she left Florida in 2012 to practice medicine in New York, when the Florida disciplinary investigation was ongoing. [T. 80, 90, 93, 102, 106].

The Hearing Committee found Respondent's attempts to justify her answer on the renewal application unavailing because the question is not whether disciplinary action may be imposed on Respondent at some future point in time, but whether she has ever been subject to disciplinary penalties by any "licensing or disciplinary agency." Contrary to Respondent's argument, an appeal confirms that she knowingly was the subject of disciplinary action in Florida, rendering her negative response to the question posed on the New York renewal application in this regard intentionally misleading. Also, the fact that Respondent actively participated in the disciplinary proceeding in Florida and received a copy of the Final Order in "the middle of January" 2015, diminishes any innocence in her answering that question incorrectly. [Ex. 4, 7, T. 77, 80, 90, 108-109].

The preponderance of the evidence clearly demonstrates that Respondent was disciplined in Florida and she intentionally failed to disclose the penalties she was subjected to when she provided an untruthful answer on her renewal application. In doing so, the Hearing Committee considered that Respondent was attempting to circumvent her obligations to the Education Department, which requires disclosure of disciplinary actions, in order to practice medicine in New York. The Hearing

Committee sustained the third and fourth specifications of professional misconduct and concluded that Respondent's conduct constituted practicing the profession of medicine fraudulently and the filing of a false report, in violation of Educ. Law §§ 6530 (2) and (21), respectively.

The Hearing Committee considered the full spectrum of penalties available by statute, including revocation, suspension and/or probation, censure and reprimand, and the imposition of monetary penalties, and found that the sustained specifications indicate Respondent's use of her medical license to render substantially inadequate medical care. Also considered by the Hearing Committee was Respondent's propensity for misrepresenting the truth, which suggests a lack of honesty as a practitioner. Concerning to the Hearing Committee was Respondent's repeated contradictions in her testimony, which could lead to discrepancies in her clinic practice and a lack of sound clinical judgment. As such, the Hearing Committee unanimously concluded that Respondent's New York medical license be subject to the penalty of Censure and Reprimand with two years' probation, with conditions.

ORDER

IT IS HEREBY ORDERED THAT:


1. The Respondent's license to practice medicine is subject to a Censure and Reprimand, and Respondent is placed on probation for a period of two years, subject to the conditions provided in the Terms of Probation, which are tolled while the Respondent is not engaged in the practice of medicine in the state of New York and require that Respondent practice under supervision. (Appendix I);
2. Respondent must comply with the terms of this Determination and Order and all the Terms of Probation attached to this Determination and Order; and
3. This Order shall be effective upon service on Respondent in accordance with the requirements of PHL § 230(10)(h).

DATED: Albany, New York
August 12th, 2016


Mohammad-Reza Ghazi-Moghadam, M.D.
Chairperson

Paul J. Lambiase
Ravinder Mamtani, M.D.

TO: Neelam Taneja Uppal, M.D.


Fort Tryon Rehabilitation & Health Care
801 W. 190th Street
New York, NY 10040


5840 Park Blvd.
Pinellas Park, Florida 33781

Timothy J. Mahar, Esq.
Associate Counsel
New York State Department of Health
Division of Legal Affairs
Bureau of Professional Medical Conduct
Corning Tower Building – 25th Floor
Albany, New York 12237

Neelam Taneja Uppal, M.D.

APPENDIX I

TERMS OF PROBATION

1. Respondent's conduct shall conform to moral and professional standards of conduct and to governing law. Any act of professional misconduct by Respondent as defined by Educ. Law §§ 6530 or 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to PHL § 230(10) or (19), or both.
2. Respondent shall remain in continuous compliance with all requirements of Educ. Law § 6502, including, but not limited to, the requirements that licensee register and continue to be registered with the New York Education Department and that licensee pay all registration fees. Respondent shall not exercise the option provided in Educ. Law § 6502(4) to avoid registration and payment of fees.
3. Respondent shall be placed on probation for a period of two years, during which Respondent's practice as a physician shall be subject to conditions imposed for a period of no less than one year. The minimum conditions shall include the following:
 - a. Respondent's medical practice shall be supervised by a licensed physician ("practice supervisor") proposed by Respondent and approved, in writing, by the director of the OPMC. The supervising physician shall be familiar with Respondent's history and with the Florida Board's Final Order and its conditions. The supervising physician shall supervise Respondent's compliance with the conditions of practice imposed by the Order. The supervising physician shall be in a position to regularly observe and assess Respondent's medical practice. The supervising physician shall acknowledge willingness to comply with the supervision terms by executing the acknowledgment provided by the OPMC.
 - i. Respondent shall ensure that the supervising physician submits quarterly reports to the OPMC regarding the quality of Respondent's medical practice, including whether diagnoses and treatments are appropriate, any unexplained absences from work, a representative sampling of at least five percent of the patients seen by Respondent to determine whether the patients managed are in line with what is appropriate and proper, and certifying Respondent's compliance with each condition imposed, and detailing, if applicable, Respondent's failure to comply.

- ii. The supervising physician shall report any questionable medical practices or possible misconduct to the OPMC.
- 4. The terms set forth in paragraph three are the minimum probation terms related to fitness to practice to be imposed on Respondent, and other terms may be added by the director of the OPMC. All compliance costs shall be Respondent's responsibility.
- 5. In addition to the terms set in paragraphs three and four above, Respondent shall also be subject to the following standard terms of probation:
 - a. The probation period shall toll when Respondent is not engaged in active medical practice in the state of New York for a period of 30 consecutive days or more. Respondent shall notify the director of the OPMC, in writing, if she is not currently engaged in, or intends to leave, active medical practice in New York 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, the probation period shall resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the director may impose as reasonably necessary to protect the health of the public.
 - b. Respondent's professional performance may be reviewed by the director of the OPMC. This review may include, but shall not be limited to, a review of office records, patients' records, hospital charts, and/or electronic records, as well as interviews and/or periodic visits with Respondent and staff at practice locations or the OPMC offices.
 - c. 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.
 - d. Respondent shall maintain legible and complete medical records which accurately reflect the evaluation and treatment of patients.
 - e. Respondent shall comply with the Determination and Order and all the associated terms, conditions, restrictions, limitations and penalties and shall be responsible for all associated compliance costs. Upon receiving evidence of non-compliance with the Order, or any violation of its terms, the director of the OPMC and/or the Board may initiate a violation of probation proceeding and/or any other proceeding against Respondent authorized by law.

APPENDIX II

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

#1 5/19

IN THE MATTER
OF
NEELAM TANEJA UPPAL, M.D.

NOTICE
OF
HEARING

TO: Neelam Taneja Uppal, M.D.

Neelam Taneja Uppal, M.D.
5840 Park Blvd.
Pinellas Park, Florida 33781

Neelam Taneja Uppal, M.D.
Fort Tryon Rehabilitation & Health Care
801 W 190th Street
New York, NY 10040

PLEASE TAKE NOTICE:

A hearing will be held 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 on May 19th, 2016 at 10:30 a.m., at the Offices of the New York State Department of Health, Riverview Center, 150 Broadway, Menands (Albany), NY 12204-2719 and at such other 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. You shall appear in person at the hearing and may be represented by counsel who shall be an attorney admitted to practice in New York state. You have the right to produce witnesses and evidence on your behalf, to issue or have subpoenas issued on your behalf in order to

require the production of witnesses and documents, and you may cross-examine witnesses and examine evidence produced against you. A summary of the Department of Health Hearing Rules is enclosed.

YOU ARE HEREBY ADVISED THAT THE ATTACHED CHARGES WILL BE MADE PUBLIC FIVE BUSINESS DAYS AFTER THEY ARE SERVED.

Department attorney: Initial here 

The hearing will proceed whether or not you appear at the hearing. Please note that requests for adjournments must be made in writing and by telephone to the New York State Department of Health, Division of Legal Affairs, Bureau of Adjudication, Riverview Center, 150 Broadway - Suite 510, Albany, NY 12204-2719, ATTENTION: HON. JAMES HORAN, DIRECTOR, BUREAU OF ADJUDICATION, (henceforth "Bureau of Adjudication"), (Telephone: (518-402-0748), upon notice to the attorney for the Department of Health whose name appears below, and at least five days prior to the scheduled hearing date. Adjournment requests are not routinely granted as scheduled dates are considered dates certain. Claims of court engagement will require detailed Affidavits of Actual Engagement. Claims of illness will require medical documentation.

Pursuant to the provisions of N.Y. Pub. Health Law §230(10)(c), you shall file a written answer to each of the charges and allegations in the Statement of Charges not less than ten days prior to the date of the hearing. Any charge or allegation not so answered shall be deemed admitted. You may wish to seek the advice of counsel prior to filing such answer. The answer shall be filed with the Bureau of Adjudication, at the address indicated above, and a copy shall be forwarded to the attorney for the Department of Health whose

name appears below. 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. Pursuant to the terms of N.Y. State Admin. Proc. Act §401 and 10 N.Y.C.R.R. §51.8(b), the Petitioner hereby demands disclosure of the evidence that the Respondent intends to introduce at the hearing, including the names of witnesses, a list of and copies of documentary evidence and a description of physical or other evidence which cannot be photocopied.

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 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 OUT IN NEW YORK PUBLIC HEALTH LAW §§230-a.
YOU ARE URGED TO OBTAIN AN ATTORNEY TO
REPRESENT YOU IN THIS MATTER.

DATE: April 5, 2016
Albany, NY


MICHAEL A. HISER
Deputy Counsel
Bureau of Professional Medical Conduct

Inquiries should be directed to:

**Timothy J. Maher
Associate Counsel
Bureau of Professional Medical Conduct
Corning Tower – Room 2512
Empire State Plaza
Albany, NY 12237
(518) 473-4282**

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

IN THE MATTER
OF
NEELAM TANEJA UPPAL, M.D.

STATEMENT
OF
CHARGES

NEELAM TANEJA UPPAL, M.D., Respondent, was authorized to practice medicine in New York State on or about January 3, 1991 by the issuance of license number 184610 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about January 8, 2015, the Board of Medicine for the State of Florida (Florida Medical Board), following a professional misconduct proceeding against Respondent conducted by a duly authorized professional disciplinary agency in the State of Florida, issued an order which found that the Respondent committed multiple acts of misconduct including the following: in the cases of Patients AM and CB, committing medical malpractice, and/or committing gross medical malpractice, and/or committing repeated medical malpractice in violation of Florida Statute §458.331(1)(t); in the case of Patient AM, inappropriately prescribing, dispensing, administering, mixing or otherwise preparing a legend drug in violation of Florida Statute §458.331(1)(q); and in the cases of Patients AM and CB and PA, failing to maintain an adequate patient medical record in violation of Florida Statute §458.331(1)(m). The penalty imposed by the Florida Board of Medicine upon Respondent included the suspension of Respondent's Florida medical license for six months, two years of probation with terms which included both the supervision of Respondent's practice for a one year period followed by monitoring of

Respondent's practice, a fine of \$10,000.00, and continuing medical education in the areas of recordkeeping and ethics.

B. The conduct resulting in the Florida order of January 8, 2015 would constitute misconduct under the laws of New York State, pursuant to the following Sections of New York State Law:

1. New York Education Law §6350(3) [practicing the profession with negligence on more than one occasion]; and/or
2. New York Education Law §6530(4) [practicing the profession with gross negligence on a particular occasion]; and/or
3. New York Education Law §6530(32) [failing to maintain an adequate medical record].

C. On or about January 5, 2016, Respondent submitted to the New York State Education Department an application to renew the registration of Respondent's New York State medical license. Respondent answered the following question on the renewal application, "No":

Since your last registration application, has any licensing or disciplinary authority revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, or refused to issue or renew a professional license or certificate held by you now or previously, or fined, censured, reprimanded or otherwise disciplined you.

Respondent intentionally made a false answer on the above application to the New York Education Department with the intent of concealing from the New York Education Department the disciplinary action taken against Respondent's Florida medical license by the order issued on or about January 8, 2015, including a license suspension, probation and a fine.

SPECIFICATIONS OF CHARGES

FIRST SPECIFICATION

VIOLATION OF EDUCATION LAW 6530(9)(b)

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(9)(b) by having been found guilty of improper professional practice or professional misconduct by a duly authorized professional disciplinary agency of another state where the conduct upon which the finding was based would, if committed in New York state, constitute professional misconduct under the laws of New York state as alleged in the facts of the following:

1. The facts in Paragraphs A and B.

SECOND SPECIFICATION

VIOLATION OF EDUCATION LAW 6530(9)(d)

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(9)(d) by having his or her license to practice medicine revoked, suspended or having other disciplinary action taken, or having his or her application for a license refused, revoked or suspended or having voluntarily or otherwise surrendered his or her license after a disciplinary action was instituted by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the revocation, suspension or other disciplinary action involving the license or refusal, revocation or suspension of an application for a license or the surrender of the license would, if

committed in New York state, constitute professional misconduct under the laws of New York state as alleged in the facts of the following:

2. The facts in Paragraphs A and B.

THIRD SPECIFICATION
FRAUDULENT PRACTICE

Respondent is charged with committing professional misconduct as defined by N.Y. Educ. Law § 6530(2) by practicing the profession of medicine fraudulently as alleged in the facts of the following:

3. The facts in Paragraph A and C.

FOURTH SPECIFICATION
FILING A FALSE REPORT

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(21) by willfully making or filing a false report, or failing to file a report required by law or by the department of health or the education department, as alleged in the facts of:

4. The facts in Paragraph A and C.

APRIL 6
DATED: March , 2016
Albany, New York


MICHAEL A. FISER
Deputy Counsel
Bureau of Professional Medical Conduct