



New York State Board for Professional Medical Conduct

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

Dennis P. Whalen
Executive Deputy Commissioner of Health
Anne F. Saile
Director, Office of Professional Medical Conduct
William J. Comiskey, Esq.
*Chief Counsel, Bureau of Professional Medical
Conduct*

Patrick F. Carone, M.D., M.P.H.
Chair
Ansel R. Marks, M.D., J.D.
Executive Secretary

November 5, 1998

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Harvey Black, M.D.
PO Box 1483
5813 East Seymour Street
Cicero, New York 13039

RE: License No. 149425

Dear Dr. Black:

Enclosed please find Order #BPMC 98-259 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect **November 5, 1998**.

If the penalty imposed by the Order is a surrender, revocation or suspension of this license, you are required to deliver to the Board the license and registration within five (5) days of receipt of the Order to Board for Professional Medical Conduct, New York State Department of Health, Hedley Park Place, Suite 303, 433 River Street, Troy, New York 12180.

Sincerely,

Ansel R. Marks, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: David M. Primo, Esq.
Primo, Primo, Centra & Kirwin, LLP
5112 West Taft Road, Suite J
Liverpool, New York 13088-4878

Robert Bogan, Esq.

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

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IN THE MATTER : CONSENT
OF : AGREEMENT
HARVEY ELLIOTT BLACK, M.D. : AND ORDER
: BPMC # 98-259

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STATE OF NEW YORK)
COUNTY OF ONONDAGA)

HARVEY ELLIOTT BLACK, M.D., deposes and says:

That on or about April 2, 1982, I was licensed to practice as a physician in the State of New York, having been issued license number 149425 by the New York State Education Department.

My current address is P.O. Box 1483, 5813 East Seymour Street, Cicero, New York 13039, and I will advise the Director of the Office of Professional Medical Conduct of any change of my address.

I understand that the New York State Board for Professional Medical Conduct has charged me with four specifications of professional misconduct as set forth in the Statement of Charges, annexed hereto, made a part hereof, and marked as Exhibit A.

I admit guilt to specifications one and two, in full satisfaction of the charges against me. I hereby agree to the following penalty:

Censure and Reprimand

I further agree that the Consent Order for which I hereby

apply shall impose a condition that, except during periods of actual suspension, I maintain current registration of my license with the New York State Education Department Division of Professional Licensing Services, and pay all registration fees.

This condition shall be in effect beginning thirty days after the effective date of the Consent Order and continuing until the full term of the Order has run, and until any associated period of probation and all probation terms have been completed and satisfied. I hereby stipulate that any failure by me to comply with such condition shall constitute misconduct as defined by New York State Education Law §6530(29).

I agree that in the event that I am charged with professional misconduct in the future, this agreement and order shall be admitted into evidence in that proceeding.

I hereby make this Application to the State Board for Professional Medical Conduct (the Board) and request that it be granted.

I understand that, in the event that this Application is not granted by the Board, nothing contained herein shall be binding upon me or construed to be an admission of any act of misconduct alleged or charged against me, such Application shall not be used against me in any way and shall be kept in strict confidence during the pendency of the professional misconduct disciplinary proceeding; and such denial by the Board shall be made without prejudice to the continuance of any disciplinary proceeding and the final determination by the Board pursuant to the provisions of the Public Health Law.

I agree that, in the event the Board grants my Application,

as set forth herein, an order of the Chairperson of the Board shall be issued in accordance with same. I agree that such order shall be effective as of the date of the personal service of this order upon me, upon mailing of this order to me at the address set forth in this agreement or to my attorney by certified mail, or upon transmission via facsimile to me or my attorney, whichever is earliest.

I am making this Application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner. In consideration of the value to me of the acceptance by the Board of this Application, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive any right I may have to contest the Consent Order for which I hereby apply, whether administratively or judicially, and ask that the Application be granted.

AFFIRMED: 10/16/98


HARVEY ELLIOTT BLACK, M.D.
RESPONDENT

The undersigned agree to the attached application of the Respondent and to the proposed penalty based on the terms and conditions thereof.

DATE: 10/16/98


DAVID M. PRIMO
Attorney for Respondent

DATE: 19 Oct 98


ROBERT HOGAN
ASSISTANT COUNSEL
Bureau of Professional
Medical Conduct

DATE: October 21, 1998


ANNE F. SAILE
DIRECTOR
Office of Professional
Medical Conduct

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

-----X
IN THE MATTER :
OF : CONSENT
HARVEY ELLIOTT BLACK, M.D. : ORDER
:
-----X

Upon the proposed agreement of HARVEY ELLIOTT BLACK, M.D. (Respondent) for Consent Order, which application is made a part hereof, it is agreed to and

ORDERED, that the application and the provisions thereof are hereby adopted and so ORDERED, and it is further

ORDERED, that this order shall be effective as of the date of the personal service of this order upon Respondent, upon mailing of this order to Respondent at the address set forth in this agreement or to Respondent's attorney by certified mail, or upon transmission via facsimile to Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 10/28/98


PATRICK F. CARONE, M.D., M.P.H.
Chairperson
State Board for Professional
Medical Conduct

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

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IN THE MATTER : STATEMENT
OF : OF
HARVEY ELLIOTT BLACK, M.D. : CHARGES

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HARVEY ELLIOTT BLACK, M.D., the Respondent, was authorized to practice medicine in New York State on April 2, 1982 by the issuance of license number 149425 by the New York State Education Department. The Respondent is currently registered with the New York State Education Department to practice medicine for the period November 1, 1997, through October 31, 1999, with a registration address of P.O. Box 1483, 5813 East Seymour Drive, Cicero, New York 13039.

FACTUAL ALLEGATIONS

A. Respondent authorized medication for Patient A on or about January 7, 1997. Respondent's care and treatment failed to meet acceptable standards of medical care in that:

1. Respondent did not maintain an accurate medical record and/or accurate record of medications prescribed for Patient A.
2. Respondent permitted unlicensed person(s) to authorize medication for Patient A.

B. Respondent authorized medication for Patient B on or about December 18, 1996. Respondent's care and treatment failed to meet acceptable standards of medical care in that:

1. Respondent did not maintain an accurate medical record and/or accurate record of medications prescribed for Patient B.
2. Respondent permitted unlicensed person(s) to authorize medication for Patient B.

SPECIFICATIONS

FIRST AND SECOND SPECIFICATIONS

Respondent is charged with failing to maintain a record which accurately reflects the evaluation and treatment of patients in violation of N.Y. Educ. Law §6530(32) in that the Petitioner charges:

1. The facts in paragraph A and A.1.
2. The facts in paragraph B and B.1.

THIRD AND FOURTH SPECIFICATIONS

Respondent is charged with permitting an unlicensed person to perform activities requiring a license in violation of N.Y. Educ. Law §6530(11) in that the petitioner charges:

3. The facts in paragraph A and A.2.
4. The facts in paragraph B and B.2.

DATED: *October 19*, 1998

Albany, New York



PETER D. VAN BUREN
Deputy Counsel
Bureau of Professional
Medical Conduct