



Board for Professional Medical Conduct

Corning Tower • Empire State Plaza • Albany, NY 12237 • (518) 474-8357

C. Maynard Guest, M.D.
Executive Secretary

July 28, 1992

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Louis Mateya, M.D.
c/o Associates in Medicine, Inc.
601 Riverside Drive
Johnson City, New York 13790

RE: License No. 184887

Effective Date 07/30/92

Dear Dr. Mateya:

Enclosed please find Order #BPMC 92-60 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect upon receipt of this letter or seven (7) days after the date of this letter, whichever is earlier.

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.

Board for Professional Medical Conduct
New York State Department of Health
Empire State Plaza
Tower Building-Room 438
Albany, New York 12237-0614

Sincerely,

C. Maynard Guest, M.D.
Executive Secretary

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

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IN THE MATTER :
OF : ORDER
LOUIS P. MATEYA, M.D. : BPMC # 92-60

-----X

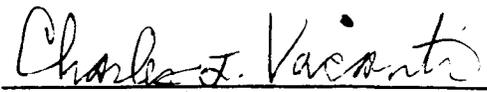
Upon the Application of Louis P. Mateya, M.D., which application is made a part hereof, it is

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

ORDERED that this order shall take effect as of the date of the personal service of this order upon the respondent or five days after mailing by certified mail.

SO ORDERED,

DATED: 17 July 1992



Charles J. Vacanti, M.D.
Chairperson
State Board for Professional
Medical Conduct

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

IN THE MATTER : APPLICATION
OF : FOR
LOUIS P. MATEYA, M.D. : CONSENT
: ORDER

STATE OF NEW YORK)
COUNTY OF BROOME) ss.:

LOUIS P. MATEYA, M.D., being duly sworn, deposes and says:
That on or about January 30, 1991, I was licensed to
practice as a physician in the State of New York, having been
issued License No. 184887 by the New York State Education
Department.

I am currently registered with the New York State Education
Department to practice as a physician in the State of New York
for the period January 1, 1991 through December 31 1992.

I understand that the New York State Board for Professional
Medical Conduct has charged me with one Specification of
professional misconduct.

A copy of the Statement of Charges is annexed hereto, made
a part hereof, and marked as Exhibit "A".

I admit guilt to the specification of misconduct as charged
in the Statement of Charges.

I agree to accept a penalty of suspension of my license to practice medicine in the State of New York for a period of five (5) years, said suspension to be stayed during the final fifty eight (58) months thereof on condition that I abide by all of the terms and conditions of probation set forth and enumerated in Exhibit "B" annexed hereto and made a part hereof. I agree to accept the aforesaid suspension and probation pursuant to the provisions set forth in New York Public Health Law Sec. 230-a(2) and (9) (McKinneys Supp. 1992).

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 any 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.

No promises of any kind were made to me. I am making this application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner.

Louis P. Mateya M.D.

LOUIS P. MATEYA, M.D.
Respondent

Sworn to before me this
27th day of ~~March~~ April, 1992.



NOTARY PUBLIC

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

IN THE MATTER : APPLICATION
OF : FOR
LOUIS P. MATEYA, M.D. : CONSENT
: ORDER

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

Date: April 27, 1992

Louis P. Mateya M.D.
LOUIS P. MATEYA, M.D.
Respondent

Date: July 3, 1992

[Signature]
~~JON S. BLECHMAN, ESQ.~~
Attorney for Respondent
BARRY A. GOSS

Date: July 9, 1992

[Signature]
JOSEPH HUBERTY
Senior Attorney

Date: July 28, 1992

[Signature]
KATHLEEN M. TANNER
Director, Office of Professional
Medical Conduct

Date: 17 July 1992

[Signature]
CHARLES J. VACANTI, M.D.
Chairperson, State Board for
Professional Medical Conduct

EXHIBIT "B"

TERMS OF PROBATION

1. That Respondent, during the period of probation, shall conduct himself in all ways in a manner befitting his professional status, and shall conform fully to the moral and professional standards of conduct imposed by law and by his profession;
2. That Respondent shall submit written notification to the New York State Department of Health (NYSDOH), addressed to the Director, Office of Professional Medical Conduct, New York State Health Department, Empire State Plaza, Tower Building, Albany, New York 12237 of any employment and practice, of Respondent's residence and telephone number and of any change in respondent's employment, practice, residence, or telephone number within or without the State of New York;
3. Respondent shall submit written proof from the Division of Professional Licensing Services (DPLS), New York State Education Department (NYSED), that respondent has paid all registration fees due and owing to the NYSED and Respondent shall cooperate with and submit whatever papers are requested by DPLS in regard to said registration fees, said proof from DPLS to be submitted by Respondent to the New York State Department of Health, addressed to the Director, Office of Professional Medical Conduct, as aforesaid, no later than the first three months of the period of probation;
4. Respondent shall submit written proof to the NYSDOH, addressed to the Director, Office of Professional Medical Conduct, as aforesaid, 1) Respondent is currently registered with the NYSED, unless Respondent submits written proof that Respondent has advised DPLS, NYSED, that Respondent is not engaging in the practice of Respondent's profession in the State of New York and does not desire to register, and that 2) Respondent has paid any fines which may have previously been imposed upon respondent by the Board of Regents; said proof of the above to be submitted no later than the first two months of the period of probation;

5. Respondent shall complete any public service requirement imposed upon him or her, prior to the completion of the probationary period, and shall submit written proof of such service to the NYSDOH, addressed to the Director, Office of Professional Medical Conduct, as aforesaid;
6. During the period of probation Respondent shall be and remain under the care of a treating psychiatrist acceptable to the New York State Board for Professional Medical Conduct (hereinafter the Board) who is familiar with the charges set forth in the Statement of Charges and Respondent's medical and psychiatric history.
7. Respondent's treating psychiatrist shall execute and deliver to the Board his acknowledgement to be provided by the Board. He/she will prepare and submit written bi-monthly reports to the Board concerning Respondent's treatment and his response thereto and said treating psychiatrist's opinion concerning any danger to the patient population as a consequence of Respondent's continuation of the practice of medicine.
8. Respondent shall execute and deliver to his treating psychiatrist and to the Board waivers waiving his right to confidentiality with respect to all matters concerning his previous and prospective medical and psychiatric treatment and allowing disclosure of such information to the Board.
9. Respondent shall submit to and be examined by a health professional selected by the Board. Said health professional shall be familiar with the facts set forth in the Statement of Charges, Respondent's medical and psychiatric history and treatment and with the terms of Respondent's probation. Respondent shall submit to and be examined by said health professional at least once every four (4) months during the period of his probation and a written report of each examination shall be made to the Board within three weeks of each examination.
10. Respondent shall deliver to said health professional selected by the Board a fully executed waiver of Respondent's right to confidentiality with respect to the examinations by said health professional and allowing disclosure to the Board of any information coming into the possession of said Board selected health professional.
11. So long as there is full compliance with each and every term set forth in these terms of probation and Respondent's treating psychiatrist and the monitoring health professional selected by the Board conclude and attest to the Board by

written report that Respondent's continued practice of medicine will not constitute a present danger to the patient population that may be served by Respondent, Respondent may continue to practice his aforesaid profession in accordance with the terms of probation set forth herein; provided however, that upon a determination or conclusion by Respondent's treating psychiatrist or the health professional selected by the Board to monitor Respondent's progress or, upon receipt of evidence of noncompliance with or any violation of these terms, the Director of the Office of Professional Medical Conduct and/or the Board may initiate a violation of probation proceeding and/or such other proceeding against Respondent as may be authorized pursuant to the Public Health Law.

I acknowledge receipt of a copy of the above Terms of Probation.

Dated: Binghamton, New York
~~March~~ June 25, 1992

Louis P. Mateya M.D.
LOUIS P. MATEYA, M.D.

EXHIBIT "A"

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

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IN THE MATTER : STATEMENT
OF : OF
LOUIS P. MATEYA, M.D. : CHARGES

-----X

LOUIS P. MATEYA, M.D., the Respondent, was authorized to practice medicine in New York State on January 30, 1991 by the issuance of license number 184887 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 January 1, 1991 through December 31, 1992. His last registered address with the New York State Education Department is c/o Associates in Medicine, Inc., 601 Riverside Drive, Johnson City, New York 13790.

FACTUAL ALLEGATIONS

A. On or about June 4, 1991, Respondent was employed by and practicing the profession of medicine at the offices of Associates in Medicine, Inc. in Johnson City, New York.

1) On or about June 4, 1991, while conducting a physical examination of Patient A (patient identified in Appendix A), a twenty two (22) year old female patient at the offices of Associates in Medicine in Johnson City, New York, Respondent unzipped his pants and fondled his genitalia.

SPECIFICATION OF CHARGES

CONDUCT EVIDENCING MORAL UNFITNESS

TO PRACTICE MEDICINE

Respondent is charged with professional misconduct in the practice of medicine by reason of his conduct which evidences moral unfitness to practice medicine within the meaning of N.Y. Educ. Law §6530(20) (McKinney Supp. 1992) [formerly N.Y. Educ. Law §6509(9) (McKinney 1985) and 8NYCRR §29.1(5) (1987)] in that Petitioner charges the facts set forth in paragraphs A and A.1.

DATED: Albany, New York
~~March~~ *June* 29, 1992



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