

Public

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

IN THE MATTER
OF
MARTIN EHRENBERG, M.D.

COMMISSIONER'S
ORDER AND
NOTICE OF
HEARING

TO: MARTIN EHRENBERG, M.D.
900 Northern Blvd.- Suite 250
Great Neck, N.Y. 11201

and MARTIN EHRENBERG, M.D.


The undersigned, Richard F. Daines, M.D., 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 MARTIN EHRENBERG, 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 MARTIN EHRENBERG, 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 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 December 11, 2007, at 10:00 a.m., at the offices of the New York State Health Department, 90 Church Street, 4th floor, N.Y., N.Y., 10007, and at such other adjourned dates, times and places as the committee may direct. The Respondent may file an answer to the Statement of Charges with the below-named attorney for the Department of Health.

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. SEAN D. O'BRIEN, DIRECTOR, BUREAU OF ADJUDICATION, and by 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. 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

November 30, 2007



Richard F. Daines, M.D.
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
N.Y., N.Y. 10007
212-417-4450

SECURITY NOTICE TO THE LICENSEE

The proceeding will be held in a secure building with restricted access. Only individuals whose names are on a list of authorized visitors for the day will be admitted to the building

No individual's name will be placed on the list of authorized visitors unless written notice of that individual's name is provided by the licensee or the licensee's attorney to one of the Department offices listed below.

The written notice may be sent via facsimile transmission, or any form of mail, but must be received by the Department **no less than two days prior to the date** of the proceeding. The notice must be on the letterhead of the licensee or the licensee's attorney, must be signed by the licensee or the licensee's attorney, and must include the following information:

Licensee's Name _____ Date of Proceeding _____

Name of person to be admitted _____

Status of person to be admitted _____
(Licensee, Attorney, Member of Law Firm, Witness, etc.)

Signature (of licensee or licensee's attorney)

This written notice must be sent to:

New York State Health Department
Bureau of Adjudication
Hedley Park Place

433 River Street, Fifth Floor South
Troy, NY 12180
Fax: 518-402-0751

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

IN THE MATTER
OF
MARTIN EHRENBERG, M.D.

STATEMENT
OF
CHARGES

MARTIN EHRENBERG, M.D., the Respondent, was authorized to practice medicine in New York State on or about May 14, 1984, by the issuance of license number 158188 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. From on or about 1997 through on or about February 9, 2006, Respondent treated Patient A (Patients are identified in Appendix A) at his office. Respondent's care and treatment of Patient A deviated from standards of acceptable medical conduct in that:
1. During the course of treatment, Respondent failed to perform and document an adequate ophthalmic examination on the patient;
 2. During the course of treatment, Respondent performed laser treatments on Patient A, purportedly for diabetic retinopathy:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical

justification for these services. Respondent intended to mislead;

- c. If Patient A actually suffered from diabetic retinopathy, Respondent inappropriately treated the diabetic retinopathy.

3. During the course of treatment, Respondent performed laser treatments on Patient A, purportedly for wet macular degeneration:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
- c. If Patient A actually suffered from wet macular degeneration, Respondent inappropriately treated the condition.

4. During the course of treatment, Respondent performed laser treatments on Patient A, purportedly for rubeosis iridis:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a

medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;

- c. If Patient A actually suffered from rubeosis iridis, Respondent inappropriately treated the condition.

5. During the course of treatment, Respondent performed laser treatments on Patient A, purportedly for subretinal neovascularization:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
- c. If Patient A actually suffered from subretinal neovascularization, Respondent inappropriately treated the condition.

6. During the course of treatment, Respondent performed 35 B-scans on Patient A, purportedly for mature cataracts:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally

performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;

- c. If Patient A actually suffered from mature cataracts, Respondent inappropriately managed the condition.

- 7. Respondent failed to maintain a record for Patient A which accurately reflected his care and treatment of the patient.

B. From on or about November 24, 1998, through on or about September 19, 2006, Respondent treated Patient B at his office. Respondent's care and treatment of Patient B deviated from standards of acceptable medical conduct, in that:

- 1. During the course of treatment, Respondent failed to perform and document an adequate ophthalmic examination on the patient;
- 2. During the course of treatment, Respondent performed laser treatments on Patient B, purportedly for diabetic retinopathy:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent

intended to mislead;

- c. If Patient B actually suffered from diabetic retinopathy, Respondent inappropriately treated the diabetic retinopathy.

3. During the course of treatment, Respondent performed laser treatments on Patient B, purportedly for wet macular degeneration:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
- c. If Patient B actually suffered from wet macular degeneration, Respondent inappropriately treated the condition.

4. During the course of treatment, Respondent performed laser treatments on Patient B, purportedly for rubeosis iridis:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact

Respondent knew that there was no medical justification for these services. Respondent intended to mislead;

- c. If Patient B actually suffered from rubeosis iridis, Respondent inappropriately treated the condition.

5. During the course of treatment, Respondent performed laser treatments on Patient B, purportedly for subretinal neovascularization:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
- c. If Patient B actually suffered from subretinal neovascularization, Respondent inappropriately treated the condition.

6. During the course of treatment, Respondent performed 23 B-scans on Patient B, purportedly for mature cataracts:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a

medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;

c. If Patient B actually suffered from mature cataracts, Respondent inappropriately treated the condition.

7. Respondent failed to maintain a record for Patient B which accurately reflected his care and treatment of the patient.

C. From on or about July 14, 2004, through on or about April 13, 2005, Respondent treated Patient C at his office. Respondent's care and treatment of Patient C deviated from standards of acceptable medical conduct, in that:

1. During the course of treatment, Respondent failed to perform and document an adequate ophthalmic examination on the patient;

2. During the course of treatment, Respondent performed laser treatments on Patient C, purportedly for diabetic retinopathy:

a. These treatments were without medical indication and/or justification;

b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;

- c. If Patient C actually suffered from diabetic retinopathy, Respondent inappropriately treated the diabetic retinopathy.

- 3. During the course of treatment, Respondent performed laser treatments on Patient C, purportedly for wet macular degeneration:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient C actually suffered from wet macular degeneration, Respondent inappropriately treated the condition.

- 4. During the course of treatment, Respondent performed laser treatments on Patient C, purportedly for rubeosis iridis:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical

justification for these services. Respondent intended to mislead;

- c. If Patient C actually suffered from rubeosis iridis, Respondent inappropriately treated the condition.

5. During the course of treatment, Respondent performed laser treatments on Patient C, purportedly for subretinal neovascularization:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
- c. If Patient C actually suffered from subretinal neovascularization, Respondent inappropriately treated the condition.

6. During the course of treatment, Respondent performed 3 B-scans on Patient C, purportedly for mature cataracts:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact

Respondent knew that there was no medical justification for these services. Respondent intended to mislead;

- c. If Patient C actually suffered from mature cataracts, Respondent inappropriately treated the condition.

- 7. Respondent failed to maintain a record for Patient C which accurately reflected his care and treatment of the patient.

D. From on or about March 25, 2003, through on or about April 14, 2005, Respondent treated Patient D at his office. Respondent's care and treatment of Patient D deviated from standards of acceptable medical conduct, in that:

- 1. During the course of treatment, Respondent failed to perform and document an adequate ophthalmic examination on the patient;
- 2. During the course of treatment, Respondent performed laser treatments on Patient D, purportedly for diabetic retinopathy:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient D actually suffered from diabetic

retinopathy. Respondent inappropriately treated the diabetic retinopathy.

3. During the course of treatment, Respondent performed laser treatments on Patient D, purportedly for wet macular degeneration:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient D actually suffered from wet macular degeneration, Respondent inappropriately treated the condition.

4. During the course of treatment, Respondent performed laser treatments on Patient D, purportedly for rubeosis iridis:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent

- intended to mislead;
- c. If Patient D actually suffered from rubeosis iridis, Respondent inappropriately treated the condition.
5. During the course of treatment, Respondent performed laser treatments on Patient D, purportedly for vitreous hemorrhage:
- a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient D actually suffered from vitreous hemorrhage, Respondent inappropriately treated the condition;
6. During the course of treatment, Respondent performed 4 B-scans on Patient D, purportedly for mature cataracts:
- a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;

- c. If Patient D actually suffered from mature cataracts, Respondent inappropriately treated the condition.
 - 7. Respondent failed to maintain a record for Patient D which accurately reflected his care and treatment of the patient.
- E. From on or about February 17, 2004, through on or about August 3, 2005, Respondent treated Patient E at his office. Respondent's care and treatment of Patient E deviated from standards of acceptable medical conduct, in that:
- 1. During the course of treatment, Respondent failed to perform and document an adequate ophthalmic examination on the patient;
 - 2. During the course of treatment, Respondent performed laser treatments on Patient E, purportedly for diabetic retinopathy:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient E actually suffered from diabetic retinopathy, Respondent inappropriately treated the diabetic retinopathy.

3. During the course of treatment, Respondent performed laser treatments on Patient E, purportedly for rubeosis iridis:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient E actually suffered from rubeosis iridis, Respondent inappropriately treated the condition.

4. During the course of treatment, Respondent performed 2 B-scans on Patient E, purportedly for mature cataracts:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient E actually suffered from mature cataracts, Respondent inappropriately treated the condition.

5. Respondent failed to maintain a record for Patient E which accurately reflected his care and treatment of the patient.
- F. From on or about April 27, 2004, through on or about September 12, 2006, Respondent treated Patient F at his office. Respondent's care and treatment of Patient F deviated from standards of acceptable medical conduct, in that:
1. During the course of treatment, Respondent failed to perform and document an adequate ophthalmic examination on the patient;
 2. During the course of treatment, Respondent performed laser treatments on Patient F, purportedly for diabetic retinopathy:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient F actually suffered from diabetic retinopathy, Respondent inappropriately treated the diabetic retinopathy.
 3. During the course of treatment, Respondent performed laser

treatments on Patient F, purportedly for wet macular degeneration:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
- c. If Patient F actually suffered from wet macular degeneration, Respondent inappropriately treated the condition.

4. During the course of treatment, Respondent performed laser treatments on Patient F, purportedly for rubeosis iridis:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
- c. If Patient F actually suffered from rubeosis iridis, Respondent inappropriately treated the condition.

5. During the course of treatment, Respondent performed laser treatments on Patient F, purportedly for subretinal neovascularization:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
- c. If Patient F actually suffered from subretinal neovascularization, Respondent inappropriately treated the condition.

6. During the course of treatment, Respondent performed laser treatments on Patient , purportedly for vitreous hemorrhage:

- a. These treatments were without medical indication and/or justification;
- b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;

- c. If Patient F actually suffered from vitreous hemorrhage, Respondent inappropriately treated the condition;

- 7. During the course of treatment, Respondent performed 9 B-scans on Patient F, purportedly for mature cataracts:
 - a. These treatments were without medical indication and/or justification;
 - b. These treatments were knowingly and intentionally performed and/or billed by Respondent as a medically necessary service, when in fact Respondent knew that there was no medical justification for these services. Respondent intended to mislead;
 - c. If Patient F actually suffered from mature cataracts, Respondent inappropriately treated the condition.

- 8. Respondent failed to maintain a record for Patient F which accurately reflected his care and treatment of the patient.

SPECIFICATION OF CHARGES

FIRST THROUGH SIXTH 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;
6. Paragraph F and its subparagraphs.

SEVENTH 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:

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

EIGHTH 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:

8. Paragraph A and its subparagraphs; Paragraph B and its subparagraphs; Paragraph C and its subparagraphs;

Paragraph D and its subparagraphs; Paragraph E and its subparagraphs; and/or Paragraph F and its subparagraphs.

NINTH THROUGH FOURTEENTH 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:

9. Paragraphs A, A2, A2(b), A3, A3(b), A4, A4(b), A5, A5(b), A6, A6(b) and A7;
10. Paragraphs B, B2, B2(b), B3, B3(b), B4, B4(b), B5, B5(b), B6, B6(b), and B7;
11. Paragraphs C, C2, C2(b), C3, C3(b), C4, C4(b), C5, C5(b), C6, C6(b) and C 7;
12. Paragraphs D, D2, D2(b), D3, D3(b), D4, D4(b); D5, D5(b), D6, D6(b) and D7;
13. Paragraphs E, E2, E2(b), E3, E3(b), E4, E4(b), and E5;
14. Paragraphs F, F2, F2(b), F3, F3(b), F4, F4(b), F5, F5(b), F6, F6(b), F7, F7(b), and F8.

FIFTEENTH THROUGH TWENTIETH SPECIFICATION
UNWARRANTED TESTS/TREATMENT

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(35) by ordering of excessive tests, treatment, or use of

treatment facilities not warranted by the condition of the patient, as alleged in the facts of:

15. Paragraphs A, A2, A2(a), A3, A3(a), A4, A4(a), A5, A5(a), A6, and A6(a);
16. Paragraphs B, B2, B2(a), B3, B3(a), B4, B4(a), B5, 5(a)6, and B6(a);
17. Paragraphs C, C2, C2(a), C3, C3(a), C4, C4(a), C5, C5(a), C6, and C6(a);
18. D, D2, D2(a), D3, D3(a), D4, D4(a); D5, D5(a), D6, and D6(a);
19. Paragraphs E, E2, E2(a), E3, E3(a), E4, and E4(a);
20. Paragraphs F, F2, F2(a), F3, F3(a), F4, F4(a), F5, F5(a), F6, F6(a), F7, and F7(a);

TWENTY FIRST THROUGH TWENTY SIXTH SPECIFICATION
FALSE REPORT

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(21) by wilfully 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:

21. Paragraphs A, A2, A2(b), A3, A3(b), A4, A4(b), A5, A5(b), A6, and A6(b);
22. Paragraphs B, B2, B2(b), B3, B3(b), B4, B4(b), B5, 5(b)6, and B6(b);
23. Paragraphs C, C2, C2(b), C3, C3(b), C4, C4(b), C5, C5(b), C6, and C6(b);

24. Paragraphs D, D2, D2(b), D3, D3(b), D4, D4(b);
D5, D5(b), D6, and D6(b);
25. Paragraphs E, E2, E2(b), E3, E3(b), E4, and E4(b);
26. Paragraphs F, F2, F2(b), F3, F3(b), F4, F4(b), F5,
F5(b), F6, F6(b), F7, and F7(b);

TWENTY SEVENTH THROUGH THIRTY-SECOND 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:

27. Paragraphs A and A7;
28. Paragraphs B and B7;
29. Paragraphs C and C7;
30. Paragraphs D and D7;
31. Paragraphs E and E5;
32. Paragraphs F and F8;

DATE: November 30, 2007
New York, New York



Roy Nemerson
Deputy Counsel
Bureau of Professional Medical Conduct