

Public

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

IN THE MATTER
OF
CHAUNCEY H. DOBSON, M.D.

MODIFICATION
ORDER

BPMC No. #97-159

Upon the proposed Application for a Modification Order of **CHAUNCEY H. DOBSON, 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, by first class mail, a copy of the Modification Order to Respondent at the address in the attached Application or by certified mail to Respondent's attorney or upon transmission via facsimile to Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 6/16/09

Redacted Signature

KENDRICK A. SEARS, M.D.
Chair
State Board for Professional
Medical Conduct

IN THE MATTER
OF
CHAUNCEY H. DOBSON, M.D.

APPLICATION FOR
MODIFICATION ORDER

CHAUNCEY H. DOBSON, M.D., (Respondent) being duly sworn deposes and says:

That on or about July 22, 1958, I was licensed to practice as a physician in the State of New York, having been issued license number 080947 by the New York State Education Department.

My current address is Redacted Address

I am currently subject to Consent Order BPMC #97-159, (hereinafter "Original Order"), annexed hereto, made a part, hereof, and marked as Exhibit 1, that was issued on June 24, 1997.

I apply, hereby, to the State Board for Professional Medical Conduct for a Modification Order (hereinafter "Modification Order"), modifying the Original Order, as follows: to delete the paragraph in the Original Order that states:

"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) (McKinney Supp 1997)."

substituting:

" Respondent shall never practice medicine in New York state as a physician, activate his registration to practice medicine as a physician in New York state or seek to reapply for a license to practice medicine as a physician in New York state."

The Modification Order to be issued will not constitute a new disciplinary action against me, but will substitute the proposed language for the above described language in the Original Order.

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 of the Board of this Application, I knowingly waive the right to contest the Original Order or the Modification Order for which I apply, both administratively and judicially, and ask that the Board grant this Application.

I understand and agree that the attorney for the Bureau of Professional Medical Conduct, the Director of the Office of Professional Medical Conduct, and the Chair of the State Board for Professional Medical Conduct each retain complete discretion to either enter into the proposed Agreement and Modification 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.

AFFIRMED:

DATED: 6-4-09

Redacted Signature

CHAUNCEY H. DOBSON, M.D.
Respondent

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

DATE: 10 June 2009

Redacted Signature

ROBERT BOGAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 6/15/09

Redacted Signature

KEITH W. SERVIS
Director
Office of Professional Medical Conduct

EXHIBIT 1



Barbara A. DeBuono, M.D., M.P.H.
Commissioner of Health

New York State Board for Professional Medical Conduct

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

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

July 1, 1997

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Chauncey H. Dobson, M.D.

Redacted Address

RE: License No. 080947

Dear Dr. Dobson:

Enclosed please find Order #BPMC 97-159 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
Hedley Park Place, Suite 303
433 River Street
Troy, New York 12180

Sincerely,

Redacted Signature

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

Enclosure

cc: Irving O. Farber, Esq.
Meiselman, Farber, Packman & Eberz
118 North Bedford Road
PO Box 151
Mt. Kisco, New York 10549

David W. Smith, Esq.

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

IN THE MATTER
OF
CHAUNCEY H. DOBSON, M.D.

CONSENT
ORDER

BPMC #97-159

Upon the application of CHAUNCEY H. DOBSON, M.D. (Respondent) for Consent Order, 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 Respondent, upon receipt by Respondent of this order via certified mail, or seven days after mailing of this order by certified mail, whichever is earliest.

SO ORDERED.

DATED: June 24, 1997

Redacted Signature

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

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

IN THE MATTER
OF
CHAUNCEY H. DOBSON, M.D.

CONSENT
AGREEMENT
AND
ORDER

STATE OF NEW YORK)
COUNTY OF) ss.:

CHAUNCEY H. DOBSON, M.D., being duly sworn, deposes and says:

That on or about July 22, 1958, I was licensed to practice as a physician in the State of New York, having been issued License No. 080947 by the New York State Education Department.

My current address is Redacted Address
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 five specifications 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 Third and Fourth Specifications, in full satisfaction of the charges against me.

I hereby agree to the following penalty:

My license to practice medicine shall be limited pursuant to NY Public Health Law §230-(a)(3) to restrict any performance of surgery by me, unless practicing as a surgical assistant or in a supervised setting. I also agree that any violation of such restrictions shall be a violation of NY Educ. Law §6530(29) and I shall be subject to prosecution for professional misconduct.

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)(McKinney Supp 1997).

I agree that in the event 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 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.

Redacted Signature

CHAUNCEY H. DOBSON, M.D.
RESPONDENT

Sworn to before me this

13 day of June, 1997

Redacted Signature

NOTARY PUBLIC

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

DATE: June 18, 1997

Redacted Signature

IRVING O. FARBER, ESQ.
Attorney for Respondent

DATE: June 18, 1997

Redacted Signature

DAVID W. SMITH
Associate Counsel
Bureau of Professional
Medical Conduct

DATE: June 23, 1997

Redacted Signature

ANNE F. SAILE
Director
Office of Professional
Medical Conduct

EXHIBIT "A"

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

IN THE MATTER
OF
CHAUNCEY H. DOBSON, M.D.

STATEMENT
OF
CHARGES

CHAUNCEY H. DOBSON, M.D., the Respondent, was authorized to practice medicine in New York State on or about July 22, 1958, by the issuance of license number 080947 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. In or about June and July, 1994, Respondent treated Patient A for leg pain and other medical conditions at his office at 200 South Broadway, Tarrytown, New York.
1. Respondent failed to obtain an adequate medical history or note such history, if any.
 2. Respondent failed to perform an adequate physical examination or note such examination, if any.
 3. Patient A complained of radicular pain but Respondent failed to evaluate, follow-up or treat such condition or note such evaluation, follow-up or treatment, if any.
- B. In or about July and August, 1992, Respondent treated Patient B for back pain and other medical conditions at his office at 200 South Broadway, Tarrytown,

New York.

1. Respondent failed to obtain an adequate medical history or note such history, if any.
2. Respondent failed to perform an adequate physical examination or note such examination, if any.
3. Respondent diagnosed Patient B with spinal stenosis but failed to evaluate, follow-up or treat such condition or note such evaluation, follow-up or treatment, if any.

C. In or about October, 1993, Respondent treated Patient C for stiff back and other medical conditions at his office at 200 South Broadway, Tarrytown, New York.

1. Respondent failed to obtain an adequate medical history or note such history, if any.
2. Respondent failed to perform an adequate physical examination or note such examination, if any.
3. Respondent inappropriately diagnosed Patient C with herniated disc.
4. Respondent inappropriately performed a spinal fusion on Patient C.

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)(McKinney Supp. 1996) 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:

1. Paragraphs A and A1-3; B and B1-3; and/or C and C1-4.

SECOND SPECIFICATION

INCOMPETENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(5)(McKinney Supp. 1996) 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:

2. Paragraphs A and A1-3; B and B1-3; and/or C and C1-4.

THIRD THROUGH FIFTH SPECIFICATIONS

FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(32)(McKinney Supp. 1996) by failing to maintain a record for

each patient which accurately reflects the evaluation and treatment of such patient as alleged in the facts of:

3. Paragraphs A and A1-2.
4. Paragraphs B and B1-3.
5. Paragraphs C and C1-2.

DATED: December , 1996
New York, New York

Redacted Signature

ROY NEMERSON
Deputy Counsel
Bureau of Professional
Medical Conduct