



**New York State Board for Professional Medical Conduct**

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

Richard F. Daines, M.D.  
Commissioner  
NYS Department of Health  
Wendy E. Saunders  
Chief of Staff  
Keith W. Servis, Director  
Office of Professional Medical Conduct

Public

Kendrick A. Sears, M.D.  
Chair  
Michael A. Gonzalez, R.P.A.  
Vice Chair  
Ansel R. Marks, M.D., J.D.  
Executive Secretary

December 26, 2007

**CERTIFIED MAIL-RETURN RECEIPT REQUESTED**

Alex Pasquariello, M.D.  
31 Woodward Road  
East Nassau, NY 12062

Re: License No. 163442

Dear Dr. Pasquariello:

Enclosed is a copy of Order #BPMC 07-285 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect January 2, 2008.

**If the penalty imposed by this Order is a surrender, revocation or suspension, you are required to deliver your license and registration within five (5) days of receipt of this Order and return it to the Office of Professional Medical Conduct, New York State Department of Health, 433 River Street, Suite 303, Troy, NY 12180-2299**

Sincerely,

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

Enclosure

cc: Brian Culnan, Esq.  
Iseman, Cunningham, Reister & Hyde  
9 Thurlow Terrace  
Albany, NY 12203

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

IN THE MATTER  
OF  
ALEX PASQUARIELLO, M.D.

CONSENT  
ORDER

BPMC No. #07-285

Upon the application of Alex Pasquariello, M.D., Respondent, in the attached Consent Agreement and Order, which is made a part of this Consent Order, it is

ORDERED, that the Consent Agreement, and its terms, are adopted and it is further

ORDERED, that this Consent Order shall be effective upon issuance by the Board, either

- by mailing of a copy of this Consent Order, either by first class mail to Respondent at the address in the attached Consent Agreement or by certified mail to Respondent's attorney, OR
- upon facsimile transmission to Respondent or Respondent's attorney, whichever is first.

SO ORDERED.

DATE: 12/22/07

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

IN THE MATTER  
OF  
ALEX PASQUARIELLO, M.D.

CONSENT  
AGREEMENT  
AND  
ORDER

Alex Pasquariello, M.D., representing that all of the following statements are true, deposes and says:

That on or about July 29, 1985, I was licensed to practice as a physician in the State of New York, and issued License No. 163442 by the New York State Education Department.

My current address is 31 Woodward Road, East Nassau, New York 12012, and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

I understand that the New York State Board for Professional Medical Conduct (Board) has charged me with ten specifications of professional misconduct.

A copy of the Statement of Charges, marked as Exhibit "A", is attached to and part of this Consent Agreement.

I plead no contest to the fifth specification in full satisfaction of the charges against me, and agree to the following penalty:

A one year suspension stayed of my medical license, with two years of probation in accordance with the terms set forth in Exhibit B hereto:

I further agree that the Consent Order shall impose the following conditions:

That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ Law § 6502 including but not limited to the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees. Respondent shall not exercise the option provided in N.Y. Educ. Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 30 days after the Consent Order's effective date and will continue so long as Respondent remains a licensee in New York State; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Consent Order and in its investigations of matters concerning Respondent. Respondent shall respond in a timely manner to all OPMC requests for written periodic verification of Respondent's compliance with this Consent Order. Respondent shall meet with a person designated by the Director of OPMC, as directed. Respondent shall respond promptly and provide all documents and information within Respondent's control, as directed. This condition shall take effect upon the Board's issuance of the Consent Order and will continue so long as Respondent remains licensed in New York State.

I stipulate that my failure to comply with any conditions of this Consent Order shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

I agree that, if I am charged with professional misconduct in future, this Consent Agreement and Order shall be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to N.Y. Pub. Health Law.

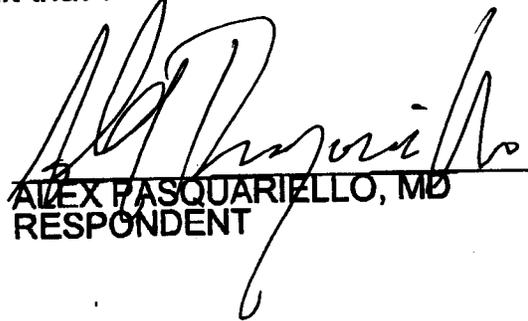
I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that this Consent Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent Order by first class mail to me at the address in this Consent Agreement, or to my attorney by certified mail, OR upon facsimile transmission to me or my attorney, whichever is first. The Consent Order, this agreement, and all attached Exhibits shall be public documents, with only patient identities, if any, redacted. As public documents, they may be posted on the Department's website.

I stipulate that the proposed sanction and Consent Order are authorized by N.Y. Pub. Health Law §§ 230 and 230-a, and that the Board and OPMC have the requisite powers to carry out all included terms. I ask the Board to adopt this Consent Agreement of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's adoption of this

Consent Agreement, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the Consent Order for which I apply, whether administratively or judicially, I agree to be bound by the Consent Order, and I ask that the Board adopt this Consent Agreement.

I understand and agree that the attorney for the Department, the Director of OPMC and the Chair of the Board each retain complete discretion either to enter into the proposed agreement and Consent 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.

DATE 12/4/2007

  
ALEX PASQUARIELLO, MD  
RESPONDENT

The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions.

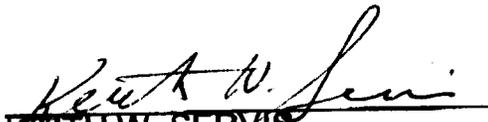
DATE: 12/4/07

  
BRIAN M. CULNAN, ESQ.  
ISEMAN, CUNNINGHAM,  
RIESTER & HYDE  
Attorneys for Respondent

DATE: 12/6/07

  
TIMOTHY J. MAHAR  
Associate Counsel  
Bureau of Professional Medical Conduct

DATE: 12/20/07

  
KEITH W. SERVIS  
Director  
Office of Professional Medical Conduct

IN THE MATTER  
OF  
ALEX PASQUARIELLO, M.D.

STATEMENT  
OF  
CHARGES

ALEX PASQUARIELLO, M.D., the Respondent, was authorized to practice medicine in New York State in or about July 29, 1985, by the issuance of license number 163442 by the New York State Education Department.

**FACTUAL ALLEGATIONS**

- A. Respondent provided medical care to Patient A in the emergency department of Ellis Hospital in Schenectady, New York on July 27, 2001 for a two to three day history which included headache unlike previous headaches Patient A had experienced and frequent vomiting, among other symptoms. Respondent discharged Patient A the same day with a diagnosis of cephalgia and tension. Patient A was diagnosed on July 28, 2001 with an intracranial hemorrhage secondary to an anterior communicating artery aneurysm. Respondent's medical care of Patient A deviated from accepted standards of care in the following respects:
1. Respondent failed to order indicated diagnostic testing of Patient A.
  2. Respondent failed to adequately rule out intracranial conditions at the time of his evaluation of Patient A.
  3. Respondent failed to maintain an adequate medical record for Patient A.

B. Respondent provided medical care to Patient B on December 19, 2004 at St. Mary's Hospital in Amsterdam, New York for, among other things, abdominal pain and nausea for one day. Patient B had a past medical history which included metastatic colon cancer. Patient B's past medical history included multiple episodes of bowel obstruction which Respondent failed to obtain and/or record. Patient B provided a present medical history which included no stool in his ostomy for 48 hours. Respondent discharged Patient B after treating him with, among other things, anti-emetics and IV fluids. Patient B returned to the St. Mary's Hospital emergency department on December 19, 2004 and was admitted for a small bowel obstruction. Respondent's medical care of Patient B deviated from accepted standards of care in the following respects:

1. Respondent failed to adequately interpret x-rays of Patient B and/or failed to order a CT scan of Patient B.
2. Respondent failed to properly evaluate and/or diagnose Patient B and/or failed to obtain indicated consultations.
3. Respondent failed to adequately treat Patient B.
4. Respondent failed to maintain an adequate medical record for Patient B.

C. Respondent provided medical care to Patient C in the emergency department of Kingston Hospital in Kingston, New York on September 2, 2002 for right-sided neck swelling for three days. Patient C's past medical history included a right-sided mastectomy secondary to breast cancer and an indwelling subclavian catheter. Respondent diagnosed Patient C with supra-clavicular soft tissue swelling of unknown etiology and discharged her to her home. On September 3, 2002, Patient C was admitted to St. Peter's

Hospital, Albany, New York for treatment of a superior vena cava thrombosis secondary to the indwelling subclavian catheter. Respondent's medical care of Patient C deviated from accepted standards of care in the following respects:

1. Respondent failed to adequately evaluate Patient C for a subclavian catheter pathology, among other things.
2. Respondent failed to adequately diagnose Patient C's condition.
3. Respondent failed to adequately treat Patient C's coagulation levels.
4. Respondent failed to maintain an adequate medical record for Patient C.

D. Respondent provided medical care to Patient D, who was then six years old, on October 17, 1999 in the emergency department of Columbia Memorial Hospital in Hudson, New York. Patient D complained of pain in her right elbow after having been pulled by her right arm. Following x-rays, Respondent discharged Patient D with an arm sling and instructions to follow-up in a clinic in two days. On October 19, 1999, Patient D was diagnosed with "Nursemaid's Elbow" and underwent a reduction of the elbow. Respondent's medical care of Patient D deviated from accepted standards of care in the following respects:

1. Respondent failed to adequately and/or appropriately diagnose and/or treat Patient D's condition.
2. Respondent failed to maintain an adequate medical record for Patient D.

## **SPECIFICATION OF CHARGES**

### **FIRST AND SECOND SPECIFICATIONS**

#### **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. The facts set forth in paragraphs A and A.1.
2. The facts set forth in paragraphs B and B.1, B and B.2, and/or B and B.3.

### **THIRD AND FOURTH SPECIFICATIONS**

#### **GROSS INCOMPETENCE**

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(6) by practicing the profession of medicine with gross incompetence as alleged in the facts of the following:

3. The facts set forth in paragraphs A and A.1.
4. The facts set forth in paragraphs B and B.1, B and B.2, and/or B and B.3.

### **FIFTH SPECIFICATION**

#### **NEGLECT 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:

5. The facts set forth in paragraphs A and A.1, A and A.2, B and B.1, B and B.2, B and B.3, C and C.1, C and C.2, C and C.3, and/or D and D.1.

#### **SIXTH 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:

6. The facts set forth in paragraphs A and A.1, A and A.2, B and B.1, B and B.2, B and B.3, C and C.1, C and C.2, C and C.3, and/or D and D.1.

#### **SEVENTH THROUGH TENTH SPECIFICATIONS**

##### **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:

7. The facts set forth in paragraphs A and A.3.
8. The facts set forth in paragraphs B and B.4.
9. The facts set forth in paragraphs C and C.4.
10. The facts set forth in paragraphs D and D.2.

DATE:

October 9, 2007  
Albany, New York



PETER D. VAN BUREN

Deputy Counsel

Bureau of Professional Medical Conduct

## EXHIBIT "B"

### Terms of Probation

1. Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by N.Y. Educ. Law §§ 6530 or 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to N.Y. Pub. Health Law § 230(19).
2. Respondent shall maintain active registration of Respondent's license (except during periods of actual suspension) with the New York State Education Department Division of Professional Licensing Services, and shall pay all registration fees.
3. Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Hedley Park Place, 433 River Street Suite 303, Troy, New York 12180-2299 with the following information, in writing, and ensure that this information is kept current: a full description of Respondent's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information.
4. Respondent shall cooperate fully with, and respond in a timely manner to, OPMC requests to provide written periodic verification of Respondent's compliance with the terms of this Consent Order. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
5. Respondent's failure to pay any monetary penalty by the prescribed date shall subject Respondent to all provisions of law relating to debt collection by New York State, including but not limited to: the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [Tax Law § 171(27); State Finance Law § 18; CPLR § 5001; Executive Law § 32].
6. The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 30 consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in, or intends to leave, active medical practice in New York State 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 State, the probation period shall resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in Exhibit "A" or as are necessary to protect the public health.

7. The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
8. Respondent shall maintain complete and legible medical records that accurately reflect the evaluation and treatment of patients and contain all information required by State rules and regulations concerning controlled substances.
9. Respondent shall enroll in and complete a continuing education program in the area of medical recordkeeping. This continuing education program is subject to the Director of OPMC's prior written approval and shall be completed within the first year of the probation period.

### PRACTICE MONITOR

10. Within thirty days of the effective date of the order, Respondent shall practice medicine only when monitored by a licensed physician, board certified in an appropriate specialty, ("practice monitor") proposed by Respondent and subject to the written approval of the Director of OPMC.
  - a. Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, on a random unannounced basis at least monthly and shall examine a selection (no fewer than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.
  - b. Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
  - c. Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.
  - d. Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC prior to Respondent's practice after the effective date of this Order.
11. Respondent shall comply with this Consent Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a violation of, these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.