



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

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

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Ansel R. Marks, M.D., J.D.  
*Executive Secretary*

**PUBLIC**

March 21, 2005

***CERTIFIED MAIL-RETURN RECEIPT REQUESTED***

Lewis Rogatnick, M.D.  
9004 East Timber Ridge Road  
Mt. Crawford, VA 22841

RE: License No. 183426

Dear Dr. Rogatnick:

Enclosed please find Order #BPMC 05-47 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect March 28, 2005.

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 or receipt of the 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

If the penalty imposed by the Order is a fine, please write the check payable to the New York State Department of Health. Noting the BPMC Order number on your remittance will assist in proper crediting. Payments should be directed to the following address:

Bureau of Accounts Management  
New York State Department of Health  
Corning Tower, Room 1258  
Empire State Plaza  
Albany, New York 12237

Sincerely,

A handwritten signature in black ink, appearing to read "Ansel R. Marks". The signature is written in a cursive style with a large, stylized initial "A".

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

cc: Robert S. Asher, Esq.  
295 Madison Avenue, Suite 700  
New York, NY 10017

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

IN THE MATTER  
OF  
LEWIS ROGATNICK, M.D.

CONSENT  
ORDER

BPMC No. 05-47

Upon the application of (Respondent) Lewis Rogatnick, M.D. 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 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.

DATED: 3-20-2005

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

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

IN THE MATTER  
OF  
LEWIS ROGATNICK, M.D.

CONSENT  
AGREEMENT  
AND  
ORDER

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

That on or about August 6, 1990, I was licensed to practice as a physician in the State of New York, and issued License No. 183426 by the New York State Education Department.

My current address is 9004 East Timber Ridge Road, Mt. Crawford, VA 22841, 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 has charged me with three 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 do not contest the first and second specifications, in full satisfaction of the charges against me, and agree to the following penalty:

My license shall be subject to a Censure and Reprimand and a fine in the amount of \$5,000, pursuant to §230-a(7) and (9) of the Public Health Law, \$2,500 payable within six months of the effective date of this order and the balance of \$2,500 payable within twelve months of the effective date of this order. Payments must be submitted to:

Bureau of Accounts Management  
New York State Department of Health  
Empire State Plaza  
Corning Tower, Room 1245  
Albany, New York 12237

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

That Respondent shall maintain current registration of licensure with the New York State Education Department Division of Professional Licensing Services (except during periods of actual suspension), and shall pay all registration fees. This condition shall take effect thirty (30) days after the Consent Order's effective date and will continue so long as Respondent remains licensed 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 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 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 Order shall constitute misconduct as defined by New York State Education 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 the Public 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 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 Order, this agreement, and all attached Exhibits shall be public documents, with only patient identities, if any, redacted.

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 ask that the Board adopt this Consent Agreement.

DATED: 2/28/05

  
LEWIS ROGATNICK, M.D.  
Respondent

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

DATE: 3/3/05

  
ROBERT S. ASHER, ESQ.  
Attorney for Respondent

DATE: 3/7/05

  
ANTHONY M. BENIGNO  
Associate Counsel  
Bureau of Professional Medical Conduct

DATE: 3/16/05

  
DENNIS J. GRAZIANO  
Director  
Office of Professional Medical Conduct

IN THE MATTER  
OF  
LEWIS A. ROGATNICK, M.D.

STATEMENT  
OF  
CHARGES

Lewis A. Rogatnick, M.D., the Respondent, was authorized to practice medicine in New York State on or about August 6, 1990, by the issuance of license number 183426 by the New York State Education Department.

**FACTUAL ALLEGATIONS**

- A. In the application to the Essex Insurance Company, Respondent indicated that he was currently on staff at Rockingham Memorial Hospital and that he did 50% of his work there. In fact, Respondent was not employed by nor did he have any privileges at Rockingham Memorial Hospital. Additionally, Respondent indicated that his privileges were pending at Rockingham when, in fact, he had not even applied for privileges at that institution. The application asked Respondent to briefly describe the type and extent of his hospital privileges. Respondent indicated Urology when, in fact, he had no privileges at Rockingham.
- B. On or about June 6, 2002 Respondent submitted an application for appointment at Cary Medical Center, Caribou, Maine. Respondent listed Cary Medical Center as his primary office address in Maine even though he had not been hired. Respondent listed Dr. A's (physician names are listed in the appendix) office address as his office even though Dr. A never received a written application from Respondent, interviewed Respondent, or even met Respondent.

**EXHIBIT A**

- C. On or about March 13, 2002 Respondent submitted an application for renewal of his DEA privileges. Respondent listed as his proposed business address his home address even though he had no intentions of practicing medicine at that location.

**SPECIFICATION OF CHARGES**

**FIRST THROUGH THIRD SPECIFICATIONS**

**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:

1. The facts of paragraph A.
2. The facts of paragraph B.
3. The facts of paragraph C.

DATED: *March 7*, 2005  
Albany, New York

*Peter D. Van Buren*  
PETER D. VAN BUREN  
Deputy Counsel  
Bureau of Professional  
Medical Conduct