

DOH STATE OF NEW YORK
DEPARTMENT OF HEALTH

433 River Street, Suite 303

Troy, New York 12180-2299

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

Dennis P. Whalen
Executive Deputy Commissioner

August 5, 1998

Mr. Robert Bentley, Director
Division of Professional Licensing Services
New York State Education Department
Cultural Education Center
Empire State Plaza
Albany, NY 12230

RE: Aftab Siddiqui, M.D.
NYS License No. 112048

Dear Mr. Bentley:

Enclosed is a copy of a Commissioner's Order and Notice of Hearing which summarily suspends Dr. Aftab Siddiqui's right to practice medicine in the State of New York. This Order was issued on August 4, 1998, and is in effect until further notice.

Sincerely,



Anne F. Saile
Director
Office of Professional Medical Conduct

Enclosure

cc: Daniel Kelleher

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

IN THE MATTER
OF
AFTAB SIDDIQUI

COMMISSIONER'S
SUMMARY
ORDER

TO: AFTAB SIDDIQUI
28 Cameron Road
Saddle River, NJ 07648

504 Livingston Street
Norwood, NJ 07648

10 Smith Street
Irvington, NJ 07111

N.Y.S. LICENSE NUMBER: 112048

The undersigned, Barbara A. DeBuono, M.D., M.P.H., Commissioner of Health of the State of New York, pursuant to N.Y. Public Health Law §230 (McKinney 1990 and Supp. 1998), upon the recommendation of a Committee on Professional Medical Conduct of the State Board for Professional Medical Conduct, has determined that the duly authorized professional disciplinary agency of another jurisdiction (New Jersey) has made a finding substantially equivalent to a finding that the practice of medicine by AFTAB SIDDIQUI (the Respondent) in that jurisdiction constitutes an imminent danger to the health of its people, as is more fully set forth in the New Jersey State Board Order of Temporary Suspension and incorporated documents (attached hereto as Appendix "A" and made a part hereof) finding a clear, imminent, and grave danger to the public health and welfare evident in Respondent's conduct.

It is therefore:

ORDERED, pursuant to N.Y. Public Health Law §230(12)(b) (McKinney 1990 and Supp. 1998), that effective immediately, Respondent shall not practice medicine in the State of New York.

Any practice of medicine in the State of New York in

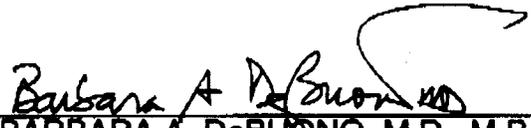
violation of this (Commissioner's) Order shall constitute Professional Misconduct within the meaning of N.Y. Educ. Law §6530(29) and may constitute unauthorized medical practice, a Felony defined by N.Y. Educ. Law §6512.

This Order shall remain in effect until the final conclusion of a hearing which shall commence within thirty days after the final conclusion of the disciplinary proceeding in the State of New Jersey. The hearing will be held pursuant to the provisions of N.Y. Pub. Health Law §230 (McKinney 1990 and Supp. 1998), and N.Y. State Admin. Proc. Act §§301-307 and 401 (McKinney 1984 and Supp. 1998). The hearing will be conducted before a committee on professional conduct of the State Board for Professional Medical Conduct on a date and at a location to be set forth in a written Notice of Summary Hearing to be provided to the Respondent after the final conclusion of the New Jersey proceeding. Said written Notice may be provided in person, by mail, or by other means. If Respondent wishes to be provided said written notice at an address other than that set forth above, Respondent shall so notify, in writing, both the attorney whose name is set forth in this Order, and the Director of the Office of Professional Medical Conduct, at the addresses set forth below.

Respondent shall notify the Director of the Office of Professional Medical Conduct, New York State Department of Health, 433 River Street, Suite 303, Troy, NY 12180-2299 via Certified Mail, Return Receipt Requested, of the final conclusion of the New Jersey proceeding immediately upon such conclusion.

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 (McKinney Supp. 1998). YOU ARE URGED TO OBTAIN AN ATTORNEY TO REPRESENT YOU IN THIS MATTER.

DATED: Albany, New York
July 31, 1998


BARBARA A. DeBUONO, M.D., M.P.H.
Commissioner of Health

Inquiries should be directed to:

Roy Nemerson
Deputy Counsel, BPMC
N.Y.S. Department of Health
Division of Legal Affairs
5 Penn Plaza
Suite 601
New York, New York 10001
(212) - 613-2615

APPENDIX A

FILED

April 9, 1998
 NEW JERSEY STATE BOARD
 OF MEDICAL EXAMINERS

STATE OF NEW JERSEY
 DEPARTMENT OF LAW & PUBLIC SAFETY
 DIVISION OF CONSUMER AFFAIRS
 STATE BOARD OF MEDICAL EXAMINERS

In the Matter of the Suspension :	
or Revocation of the License of :	
:	
AFTAB SIDDIQUI, M.D. :	ORDER DENYING MOTION FOR
:	STAY OF PROCEEDINGS
To Practice Medicine & Surgery :	
in the State of New Jersey :	

This matter was opened before the New Jersey State Board of Medical Examiners (the "Board") upon the filing of a Verified Complaint and an Order to Show Cause, on March 27, 1998, requiring respondent Aftab Siddiqui, M.D., to appear before the Board on April 8, 1998, and then show cause why an Order temporarily suspending or otherwise limiting respondent's license to practice medicine in New Jersey should not issue pending final disposition of all charges in the Administrative Complaint. On April 8, 1998, respondent Aftab Siddiqui, M.D., appeared before the Board, represented by Anthony O. Smith, Esq., for the limited purpose of advancing a motion to stay the Board's proceedings pending the completion of the criminal proceedings pending against Dr. Siddiqui.* Respondent argued that any administrative proceedings in this matter would "impinge upon Siddiqui's rights as a criminal defendant under the Fifth, Sixth, and Fourteenth Amendments of the Federal Constitution". Deputy Attorney General James F. Lafargue appeared for the State, and argued that the motion not be granted.

CELESTINE T. B. 10

The Board finds that no cause exists to stay administrative proceedings in this matter. Initially, we note that the complaint charges respondent with conduct -- namely, writing prescriptions without any medical justification or reason therefore -- that is alleged to present a clear and imminent danger to public health, safety and welfare. The fact that such conduct may also be the predicate for criminal charges against respondent in no way can relieve or foreclose the Board from carrying out its paramount obligation to protect public health, safety and welfare. Indeed, respondent's argument, carried to its extreme, would yield a logical absurdity -- namely, when licensees engage in conduct that is sufficiently egregious to not only be the basis for disciplinary sanction, but also for criminal action, the Board would be precluded from taking any remedial actions against said licensees until the conclusion of criminal proceedings, and thereby the public would necessarily be exposed to the continued risks practice by said practitioners might pose until the end of criminal proceedings.

We additionally agree with the Attorney General's argument that direct judicial precedent rejecting the argument advanced by respondent is found in State v. Kobrin Securities, Inc., 111 N.J. 307 (1988). Therein, the Supreme Court rejected argument made that a civil fraud case against certain associated securities dealers should be stayed pending the resolution of then pending criminal actions arising out of the same transactions. Most significantly, the Court noted that "when relief [in the civil action] is sought to prevent continued injury to the public, such as that caused by the continued dissemination of unapproved drugs, the civil proceedings should not be

stayed except in the most unusual circumstances". 111 N.J. at 314 (citation omitted). Herein, the Attorney General's application for temporary suspension is clearly fueled by a desire to prevent continued injury to the public. We find the logic of Kobrin Securities to be squarely on point and compelling, and thus reject respondent's motion for a stay of proceedings.*

WHEREFORE, it is on this 8th day of April, 1998

ORDERED:

The motion of respondent Aftab Siddiqui for a stay of proceedings before the Board, pending the resolution of pending criminal complaints, is hereby denied.

NEW JERSEY STATE BOARD OF
MEDICAL EXAMINERS

By:



Bernard Robins, M.D.
Board President

MAY 11, 1998

EFFECTIVE

April 8, 1998
 NEW JERSEY STATE BOARD
 OF MEDICAL EXAMINERS

NEW JERSEY STATE BOARD
 OF MEDICAL EXAMINERS
 STATE OF NEW JERSEY
 DEPARTMENT OF LAW & PUBLIC SAFETY
 DIVISION OF CONSUMER AFFAIRS
 STATE BOARD OF MEDICAL EXAMINERS

In the Matter of the Suspension :
or Revocation of the License of :

AFTAB SIDDIQUI, M.D.

ORDER OF TEMPORARY SUSPENSION

To Practice Medicine & Surgery :
in the State of New Jersey :

This matter was opened before the New Jersey State Board of Medical Examiners (the "Board") upon the filing of a Verified Complaint and an Order to Show Cause, on March 27, 1998, requiring respondent Aftab Siddiqui, M.D., to appear before the Board on April 8, 1998, and then show cause why an Order temporarily suspending or otherwise limiting respondent's license to practice medicine in New Jersey should not issue pending final disposition of all charges in the Administrative Complaint. Following the Board's denial of a preliminary motion made by respondent to stay proceedings (see Order Denying Motion for Stay of Proceedings, filed April 9, 1998), the Board proceeded to conduct a hearing upon the Attorney General's application for the temporary suspension of respondent's license. Deputy Attorney General James F. Lafargue appeared on behalf of complainant Attorney General. Respondent was represented by Anthony O. Smith, Esq., who appeared at, but did not participate in, the hearing in this matter (after the motion to stay proceedings was denied).

The Attorney General alleges, within the filed complaint, that on January 14, 1998, respondent, along with two other physicians, two medical receptionists and seven others was indicted for participating in a conspiracy to defraud the New Jersey Medicaid program. Respondent is accused, within the 51 count indictment, *inter alia*, of illegally

DUPLICATED TRUE COPY

dispensing, by way of prescription, medications consisting of prescription legend drugs, to persons who he had neither examined nor treated, and who he well knew had no medical condition necessitating such prescriptions, and participating in the falsification of medical records in order to create the false appearance and impression of legitimate medical purpose for the medications (Exhibit A; Count One; p. 9)¹.

The administrative complaint additionally detailed events that occurred when two visits were made to respondent's office by undercover investigators on January 29, 1997 and February 4, 1997. In both cases, respondent is charged with issuing prescriptions for what amount to drug orders, set forth on handwritten lists, carried by undercover investigators posing as "patients". In both cases, it is alleged that respondent issued prescriptions for many of the drugs requested on the undercover investigator's lists, notwithstanding the fact that no medical cause or necessity was determined to, or in fact, existed for the medications. Respondent's actions are alleged to constitute multiple violations of the Medical Practices Act, and to be actions which demonstrate that respondent's continued practice would present a clear and imminent danger to public health, safety, and welfare necessitating

¹ Specific charges against respondent within the criminal indictment are:

Count One	Conspiracy to Commit Racketeering -- Second Degree
Count Two	Racketeering -- Second Degree
Count Thirty-Eight	Destruction, Falsification or Alteration of Records Relating to Medical Care -- Fourth Degree
Count Forty-One	Destruction, Falsification or Alteration of Records Relating to Medical Care -- Fourth Degree
Count Fifty-One	Medicaid Fraud -- Third Degree

the temporary suspension of his license, pending the completion of plenary proceedings in this case, see N.J.S.A. 45:1-22².

The Attorney General's application for the temporary suspension of Dr. Siddiqui's license was supported by the following documents, appended to the Verified Complaint and introduced into evidence at the hearing:

Exhibit A: Indictment in State of New Jersey v. Dicker, et al.

Exhibit B: Investigation Report prepared by Investigator Michelle Whitted (detailing undercover visit to Dr. Siddiqui's office on January 29, 1997), dated February 7, 1997.

Exhibit C: Copies of Prescriptions written by Dr. Siddiqui to patients "Ronald Johnson" and "Sheila Carson", dated January 29, 1997; Medicaid Eligibility Cards for "Ron Johnson" and "Sheila Carson"; report of Investigator Evalyn Catalano dated February 14, 1997 (re: filled prescriptions).

Exhibit D: Investigation Report prepared by Investigator Alex M. Adkins, dated February 19, 1997 (detailing undercover visit to Dr. Siddiqui's office on February 4, 1997) and certification of Alex M. Adkins dated March 10, 1998.

Exhibit E: Copies of Prescriptions written by Dr. Siddiqui for patients "David Brown" and "Alex Hawkins" dated February 4, 1997.

The un rebutted evidence before us supports findings that, on two separate occasions when undercover investigators visited respondent's office, respondent essentially acted not as a medical doctor but rather as a store clerk, filling shopping lists carried by customers for

² The complaint alleges that grounds for the imposition of disciplinary sanction against respondent exist pursuant to N.J.S.A. 45:1-21(b) (engaging in the use of dishonesty, fraud, deception, misrepresentation, false promise and/or false pretense), N.J.S.A. 45:1-13 (indiscriminate prescribing of controlled dangerous substances), N.J.S.A. 45:1-21(c) (engaging in gross malpractice, gross negligence or gross incompetence), N.J.S.A. 45:9-16(I) (professional incompetence to practice medicine), N.J.S.A. 45:1-21(d) (engaging in repeated acts of negligence, malpractice or incompetence), N.J.S.A. 45:1-21(e) (engaging in professional or occupational misconduct) and 45:9-6 (demonstration of the lack of the continuing requirement for medical licensure of good moral character).

prescriptions drugs, without regard for the medical necessity for any of the drugs being doled out. Investigator Whitted thus reported that, when she visited Dr. Siddiqui's office on January 29, 1997, she was able to obtain prescriptions for ten medications by doing nothing more than presenting a handwritten list of drugs sought to Dr. Siddiqui; as recounted in her report:

At approximately 10:55 a.m., I entered the examination room to see the doctor. ... Upon entering the room, I saw the doctor, described as an Indian male, appeared to be about 5'4" tall seated at a small counter top area. The room was only equipped with an examination chair ... Yolanda attempted to check my blood pressure three times, until finally she stated to the doctor that the blood pressure machine was broken. I gave the doctor the list [of drugs that Investigator Whitted was seeking prescriptions for] comprised by Peggy. He went down the list and crossed off six of the drugs. One of the drugs was Percocet. He stated to me that he doesn't prescribe narcotics at this office. He also stated that on January 27, 1997, he received several telephone calls from several pharmacies in reference to some prescriptions he wrote for patients on January 27, 1997. The rest of the medications on the list provided to him were copied onto two prescription papers and handed to me.

The doctor wrote prescriptions for the following drugs:

1. Augmentin
2. Polyhistidine DM
3. Zantac
4. Difulcan
5. Zerit
6. Mevacor
7. Procardia XL
8. Zovirax Ointment
9. Proventil Inhaler
10. Zovirax [Exhibit B in evidence; emphasis added]

Undercover investigator Alex M. Adkins was similarly able to successfully visit Dr. Siddiqui's office for the first time, and, upon simply handing a list of medications sought to Dr. Siddiqui, obtain prescriptions for a slew of drugs. As was the case with Investigator Whitted, it is clear from the investigation report in evidence that

Investigator Adkins had no medical condition necessitating any of the prescribing done by respondent, nor did respondent make any effort to ascertain whether any of the drugs sought by Investigator Adkins was medically indicated or necessary; as recounted in Investigator Adkins' report:

At approximately 3:30 p.m., Doctor Siddiqui arrived in the office. The Doctor immediately began seeing patients. Peggy arranged for Det. Cox and I to see the Doctor first. Det. Cox was called first. While waiting to see the Doctor, Peggy stated that I should use the same list that Det. Cox used. This list is a list of Drugs that we were asking for. After approximately 5 minutes Det. Cox emerged from the examination room. Peggy stated that I was next. I entered the room where the Doctor was seated at a small table. The Doctor asked me if I was diagnosed. I gave a nod in response. The Doctor asked what my symptoms were. I did not answer at this time. Dr. Siddiqui then began reading the list and telling me the symptoms that go along with each medication. Dr. Siddiqui wrote out the prescriptions for Alex Hawkins and handed them to me. Prescriptions written in the name David Brown by Dr. Siddiqui were given to Det. Cox. Prescriptions were written for the following medications:

Prilosec 20mg
Epivir 150 mg
Proventil Inhaler
Procardia XL
 Diflucan 200 mg
Mevacor 20mg
Invirase 200 mg
Xovirax 6 mg
Cipro 50 mg
Prozac 20 mg [Exhibit D in evidence; emphasis added]

The un rebutted sworn statements of undercover investigators Whitted and Adkins thus poignantly depict a practice where multiple prescriptions were issued to individuals, with no attempt made by the licensee to determine whether any of the prescribing that was being done was in fact medically indicated or necessary. Investigator Adkins' comments, regarding the overtly cynical manner in which Dr. Siddiqui "described the symptoms for each medication", are chilling, and

necessarily suggest that respondent well knew that the "patients" in his office were individuals without need for any of the substantial quantity of drugs being prescribed.³

We find the clear and imminent -- indeed, grave -- danger to public health and welfare presented by Dr. Siddiqui's conduct to be evident. Dr. Siddiqui used his medical license, and the attendant power to prescribe, as a means to facilitate the sale of prescription drugs. He prescribed medications without concern or regard for medical need, and without apparent thought or concern for the use to which the drugs he was prescribing would be put. By doing so, he necessarily abused and shattered the trust invested in him as a medical licensee.

There is no doubt that the power to prescribe is a power which, when exercised properly and coupled with the good faith employment of a physician's judgment, offers great potential to cure sickness and alleviate human suffering. As such, it is unquestionably one of the fundamental powers delegated to medical licensees, and a vital weapon in the physician's arsenal of healing powers. When abused, and used in bad faith, however, the power to prescribe can become a deadly tool that can effect suffering by proliferating the scourge of drug abuse and addiction. By distributing substantial quantities of medications by prescription, without medical necessity or cause, respondent acted not as a physician, but as a street level drug dealer, whose misconduct was only aggravated by his medical education, and presumed knowledge of the

³ We note that the statements of Investigator Whitted and Investigator Adkins alone (coupled with the copies of the prescriptions they were able to obtain from respondent) form an adequate predicate upon which we conclude that Dr. Siddiqui's continued practice presents a clear and imminent danger to public health, safety and welfare, justifying the temporary suspension of his license. While the allegations regarding his indictment for medicaid fraud thus are unquestionably significant, we are cognizant that respondent is presumed to be innocent of those charges until proven otherwise, and we do not find it necessary to base our action upon the fact that respondent is the subject of a criminal indictment.

multitude of hazards to human health attendant to the abuse and misuse of drugs.

We find the inherent dereliction of judgment exercised by Dr. Siddiqui to be severe, and his flouting of the principles and ethics of medical practice to be flagrant. We unanimously conclude that no sanction short of the full and immediate temporary suspension of his license could adequately protect the public in this case.

WHEREFORE, it is on this 11th day of May, 1998

ORDERED, effective April 8, 1998

The license of respondent Aftab Siddiqui, M.D., to practice medicine and surgery in the State of New Jersey is hereby temporarily suspended. The temporary suspension ordered herein shall remain in place until the conclusion of plenary proceedings (as evidenced by the entry of a final order of the Board) in this matter.

NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

By:


Bernard Robins, M.D.
Board President

FILED

PETER VERNIERO
ATTORNEY GENERAL OF NEW JERSEY

By: James F. Lafargue
Deputy Attorney General
Division of Law, 5th floor
124 Halsey St.
Newark, New Jersey 07102
Tel. (973) 648-2972

March 27, 1998
NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MEDICAL EXAMINERS

In the Matter of the Suspension
or Revocation of the License of

AFTAB SIDDIQUI, M.D.

To Practice Medicine and Surgery
in the State of New Jersey

Administrative Action

VERIFIED COMPLAINT

PETER VERNIERO, ATTORNEY GENERAL OF NEW JERSEY, by James F. Lafargue, Deputy Attorney General, with offices located at 124 Halsey St., Newark, New Jersey, on the basis of information and belief, by way of Complaint says:

GENERAL ALLEGATIONS

1. Complainant, Attorney General of New Jersey, is charged with enforcing the laws in the State of New Jersey, pursuant to N.J.S.A. 52:17A-4(h), and is empowered to initiate administrative disciplinary proceedings against persons licensed by the Board of Medical Examiners, pursuant to N.J.S.A. 45:1-14 et seq.

2. The New Jersey State Board of Medical Examiners is charged

with the duty and responsibility of regulating the practice of medicine and surgery in the State of New Jersey pursuant to N.J.S.A. 45:9-1 et seq.

3. Respondent, Aftab Siddiqui, M.D., at all times pertinent to this complaint, has been licensed to practice medicine and surgery in the State of New Jersey, and has maintained offices at among other places, 10 Smith St., Irvington, New Jersey.

4. On January 14, 1998, Respondent, two other physicians, two medical receptionists and seven others were indicted for participation in a massive conspiracy to defraud the New Jersey Medicaid program by issuing prescriptions outside the course of medical practice for a variety of expensive drugs which could be resold for profit. The 51-count indictment alleged that Respondent participated in a criminal enterprise which operated in New Jersey and New York, and was conducted through a pattern of racketeering activity which included the following (Exhibit A at 5):

a. The fraudulent sale of Medicaid Eligibility Identification Cards in order to facilitate the unlawful distribution of medications, consisting of controlled dangerous substances and prescription legend drugs, at government expense under the Medicaid program;

b. The unlawful prescription and distribution of controlled dangerous substances by members of the enterprise who would be licensed medical doctors, without proper medical examination or necessity therefor;

c. The falsification of records relating to medical care by maintaining medical files containing false information as to medical histories, diagnoses, medical treatments and medications prescribed, in order to create the false impression that there was a medical necessity to prescribe medications, consisting of controlled dangerous substances and prescription legend drugs, for Medicaid recipients, who, in reality, would be neither examined nor treated by the prescribing

physicians;

d. The theft of money by deception by members of the enterprise, who would knowingly purchase medications, consisting of controlled dangerous substances and prescription legend drugs, obtained through the fraudulent use and sale of Medicaid Eligibility Identification Cards, at prices well below the amounts paid by the government to reimburse the pharmacies which had dispensed said medications, which medications then were resold by members of the enterprise at a profit;

e. The maintenance or operation of a premises or facility used for the manufacture of controlled dangerous substances, including oxycodone, a Schedule II narcotic drug, at which said substances would be received, sorted, counted and repackaged for later resale;

f. The employment and use of a juvenile, who was seventeen years of age or younger, to distribute and possess with the intent to distribute controlled dangerous substances, and to maintain or operate a premises or facility used for the manufacture and storage of said substances; and

g. The possession with the intent to distribute and distribution of controlled dangerous substances in order to obtain financial benefit for members and associates of the enterprise.

5. The above indictment alleged that the specific role of Respondent in the criminal enterprise was that he:

as a licensed medical doctor, would illegally dispense, by way of prescription, medications consisting of prescription legend drugs, to persons who he had neither examined nor treated, and who he well knew had no medical condition necessitating such prescriptions, and who would participate in the falsification of medical records in order to create the false appearance and impression of legitimate medical purpose for said medications. (Exhibit A at 9)

6. The specific crimes with which Respondent was charged in the above indictment include racketeering and destroying, altering or falsifying patient medical records. (Exhibit A at 15)

COUNT I.

1. Complainant repeats the General Allegations above as if fully set forth herein and incorporated by reference.

2. On January 29, 1997, Detective Michelle Whitted, an undercover investigator of the Newark Police Dept. and County Investigator Kyle Jackson visited the medical office of Respondent at 10 Smith St., Irvington, posing under the assumed names of Sheila Carson and Ronald Johnson respectively as persons seeking prescriptions. (Exhibit B at 1, and C at 5)

3. Det. Whitted and Inv. Jackson entered the office, where approximately eight people appeared to be waiting for the doctor. They were greeted by a woman identified as Yolanda. Inv. Jackson asked for Peggy, who appeared and asked who sent them to her. After Inv. Jackson responded "Trudy", Peggy invited Det. Whitted and Inv. Jackson to sit in Peggy's office. (Exhibit B at 2)

4. Inside her office, Peggy made a telephone call and asked both Det. Whitted and Inv. Jackson questions from an information sheet which she filled out on each of them. Det. Whitted and Inv. Jackson each gave Peggy \$60.00 in cash. Peggy asked to see their lists, which both Det. Whitted and Inv. Jackson gave to her. Peggy added five additional drugs to Det. Whitted's list. Peggy took a

black waist hip bag, placed the cash in a zipped compartment of the bag, and secured the bag around her waist. (Exhibit B at 2)

5. After 20 minutes, Yolanda directed Inv. Jackson to an examination room. After another 20 minutes, Yolanda directed Det. Whitted to an examination room. On entering the room, which was equipped only with an examination chair, Det. Whitted saw Respondent seated at a counter. Yolanda attempted to check Det. Whitted's blood pressure, but stated after three attempts that the blood pressure machine was broken. Respondent did not take any medical history or perform any type of physical examination. (Exhibit B at 2)

6. Det. Whitted gave Respondent her list as modified by Peggy. Respondent examined the list and crossed off six of the drugs, including Percocet, stating that he did not prescribe narcotics at this office. (Exhibit B at 2)

7. Respondent then copied the remaining ten drug names from the list onto two prescription blanks and handed the blanks to Det. Whitted. The prescriptions were for Augmentin, Polyhistine DISMISS, Zantac, Diflucan, Zerit, Mevacor, Procardia XL, Zovirax ointment, Proventil inhaler and Zovirax. (Exhibit C)

8. Respondent also wrote prescriptions for Inv. Jackson. Those prescriptions were for Zantac, AZT, Biaxin, Polyhistine DISMISS, Procardia XL, Prozac, Mevacor, Zovirax, Diflucan, Proventil inhaler and Lotrisone cream. (Exhibit C)

9. Det. Whitted then went into the bathroom. When she came out of the bathroom, Peggy told Det. Whitted that there was a man

in the hallway identified as Lenny who would buy her prescriptions. Lenny then entered Peggy's office and Peggy asked if he would buy Det. Whitted's prescriptions. Lenny replied that he would, and left to speak with Yolanda. (Exhibit B at 3)

10. Det. Whitted and Inv. Jackson then left the office, Peggy walked behind them, trying to give them her telephone number to call her back about selling the prescriptions or the medications. (Exhibit B at 3)

11. Respondent's course of conduct as alleged herein evidences the use of dishonesty, fraud, deception, misrepresentation, false promise and/or false pretense, and is thus a basis for disciplinary sanction pursuant to N.J.S.A. 45:1-21(b).

12. Prescribing unnecessary and unwarranted drugs to Det. Whitted and Inv. Jackson as alleged in this Count constitutes gross malpractice, gross negligence, or gross incompetence and is thus a basis for disciplinary sanction pursuant to N.J.S.A. 45:1-21(c). Such conduct is also evidence of professional incompetence and thus basis for disciplinary sanction pursuant to N.J.S.A. 45:9-16(i).

13. Respondent's individual acts and failures as alleged in this Count, either independently or when considered in relation to other acts and omissions alleged in this complaint, constitute repeated acts of malpractice, negligence or incompetence and thus are a basis for disciplinary sanction pursuant to N.J.S.A. 45:1-21(d).

14. Respondent's course of conduct as alleged herein evidences professional misconduct and is thus a basis for

disciplinary sanction pursuant to N.J.S.A. 45:1-21(e).

15. Respondent's course of conduct as alleged in this Count demonstrates lack of good moral character, which is a continuing requirement for medical licensure pursuant to N.J.S.A. 45:9-6.

16. Respondent's course of conduct as alleged in this Count palpably demonstrates that his continued practice of medicine presents a clear and imminent danger to the public health, safety and welfare pursuant to N.J.S.A. 45:1-22.

COUNT II.

1. Complainant repeats the General Allegations above as if fully set forth herein and incorporated by reference.

2. On February 4, 1997, an undercover investigator of the Division of Criminal Justice named Alex M. Adkins visited the medical office of Respondent at 10 Smith St., Irvington, posing under the assumed name of Alex Hawkins as a person seeking prescriptions. (Exhibit D at 1)

3. Investigator Adkins entered Respondent's office accompanied by Detective Cox of the East Orange Police Dept., who posed as a person seeking prescriptions as well. Investigator Adkins was also accompanied by a confidential informant known to Respondent and his receptionist Peggy. Investigator Adkins recognized Peggy from a previous undercover investigation. (Exhibit D at 1)

4. Peggy invited Investigator Adkins, Det. Cox and the confidential informant into her office where she told them that Respondent had lowered his price to \$50.00 because \$60.00 was too

much to ask for prescriptions. Peggy stated that Respondent was better and faster than Dr. Campos, but does not give prescriptions for controlled drugs at this office. (Exhibit D at 1-2)

5. The confidential informant asked Peggy if they could leave the Medicaid cards there and pick them up when Respondent arrived at the office. Peggy agreed, and the confidential informant left two Medicaid cards and \$120.00. Peggy stated that Respondent would not arrive until 3 p.m. (Exhibit D at 1-2)

6. While waiting for Dr. Siddiqui, the confidential informant showed Investigator Adkins and Det. Cox several pharmacies used by Lenny to fill prescriptions. At 2:55 p.m., Investigator Adkins, Det. Cox and the confidential informant returned to Respondent's office at which point there were ten people in the waiting room. Thereafter, the confidential informant was called into the office and Investigator Adkins followed to find several people discussing the business of buying and selling prescriptions. (Exhibit D at 2)

7. At 3:30 p.m., Det. Cox was called to see Dr. Siddiqui. While Investigator Adkins was waiting for him, Peggy told Investigator Adkins to use the same list of drugs he was asking for that Det. Cox used. After five minutes, Det. Cox came out with two prescription blanks written by Dr. Siddiqui in Det. Cox's assumed name of David Brown. (Exhibit D at 2)

8. The prescriptions referenced in the preceding paragraph were for ten medications, including Prilosec, Epivir, Proventil inhaler, Procardia XL, Diflucan, Mevacor, Invirase, Zovirax, Cipro and Prozac. (Exhibit E)

9. Investigator Adkins then went into the room where Dr. Siddiqui was seated at a small table. Dr. Siddiqui asked if Investigator Adkins was diagnosed, to which he nodded. Dr. Siddiqui asked for Investigator Adkins's symptoms but he did not answer. Dr. Siddiqui then read the list Investigator Adkins had brought, and told Investigator Adkins the symptoms which go along with each medication. Dr. Siddiqui then wrote out prescriptions in Inv. Adkins's assumed name of Alex Hawkins. (Exhibit D at 2).

10. The prescriptions referenced in the preceding paragraph were for the same ten medications as those written for Det. Cox, i.e., Prilosec, Epivir, Proventil inhaler, Procardia XL, Diflucan, Mevacor, Invirase, Zovirax, Cipro and Prozac. (Exhibit E)

11. Respondent's course of conduct as alleged herein evidences the use of dishonesty, fraud, deception, misrepresentation, false promise and/or false pretense, and is thus a basis for disciplinary sanction pursuant to N.J.S.A. 45:1-21(b).

12. Prescribing unnecessary and unwarranted drugs to Det. Cox and Investigator Adkins as alleged in this Count constitutes gross malpractice, gross negligence, or gross incompetence and is thus a basis for disciplinary sanction pursuant to N.J.S.A. 45:1-21(c). Such conduct is also evidence of professional incompetence and thus basis for disciplinary sanction pursuant to N.J.S.A. 45:9-16(i).

13. Respondent's individual acts and failures as alleged in this Count, either independently or when considered in relation to other acts and omissions alleged in this complaint, constitute repeated acts of malpractice, negligence or incompetence and thus

are a basis for disciplinary sanction pursuant to N.J.S.A. 45:1-21(d).

14. Respondent's course of conduct as alleged herein evidences professional misconduct and is thus a basis for disciplinary sanction pursuant to N.J.S.A. 45:1-21(e).

15. Respondent's course of conduct as alleged in this Count demonstrates lack of good moral character, which is a continuing requirement for medical licensure pursuant to N.J.S.A. 45:9-6.

16. Respondent's course of conduct as alleged in this Count palpably demonstrates that his continued practice of medicine presents a clear and imminent danger to the public health, safety and welfare pursuant to N.J.S.A. 45:1-22.

WHEREFORE, complainant demands that the Board of Medical Examiners issue an order:

1. Temporarily suspending the license of Aftab Siddiqui, M.D., to practice medicine and surgery in the State of New Jersey, pending the disposition of the plenary hearing on this administrative complaint and any supplemental complaints which may be filed, pursuant to N.J.S.A. 45:1-22.
2. Permanently revoking the license of Aftab Siddiqui, M.D., to practice medicine and surgery in the State of New Jersey.
3. Assessing civil penalties in accordance with N.J.S.A. 45:9-22 and N.J.S.A. 45:1-25, for each and every transaction set forth herein as constituting a separate offense.
4. Assessing the costs of investigation and prosecution of

this action, including the costs of transcripts if applicable.

5. Ordering restitution and/or such other relief as it may deem appropriate and just.

PETER VERNIERO
ATTORNEY GENERAL OF NEW JERSEY

By: James F. Lafargue
James F. Lafargue
Deputy Attorney General

Dated: March 25, 1998