



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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NYS Department of Health*

Dennis P. Whalen
*Executive Deputy Commissioner
NYS Department of Health*

Dennis J. Graziano, Director
Office of Professional Medical Conduct

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Chair

Denise M. Bolan, R.P.A.
Vice Chair

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

May 8, 2002

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Robert Nielson, M.D.
8 Bear Cub Crossing
Saratoga Springs, NY 12866

RE: License No. 147659

Dear Dr. Nielson:

Enclosed please find Modification Order #BPMC 00-112 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect May 6, 2002.

Sincerely,

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

Enclosure

cc: Sharif Mahdavian, Esq.
Wilfred T. Friedman, Esq.
The Bar Building
36 West 44th Street
New York, NY 10036

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

IN THE MATTER :
OF : MODIFICATION ORDER
ROBERT NIELSON, M.D. : BPMC # 00-112

Upon the application of ROBERT NIELSON, M.D., (Respondent) to modify a prior order, which application is made a part hereof, it is agreed to and

ORDERED, that the application and the provisions thereof are adopted; it is further

ORDERED, that Order BPMC No. 00-112 is modified to replace the language of paragraph seven with the proposed language on this application to modify the prior Board Order; 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 via certified mail, whichever is earliest.

SO ORDERED

Dated: May 6, 2002



WILLIAM P. DILLON, M.D.
Chairperson
State Board for Professional Medical Conduct

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

IN THE MATTER :
OF : APPLICATION TO
ROBERT NIELSON, M.D. : MODIFY ORDER
: BPMC # 00-112

ROBERT NIELSON, M.D., Respondent, states that I was authorized to practice medicine in New York State on September 18, 1981, by the issuance of License No. 147659 by the New York State Education Department.

I am currently registered with the New York State Education Department to practice in the State of New York. My address is 8 Bear Cub Crossing, Saratoga Springs, New York 12866.

I am the subject of BPMC Order No.00-112 annexed hereto, made a part hereof, and marked as Exhibit 1. I am applying to the State Board for Professional Medical Conduct for an Order (henceforth "Modification Order"), modifying paragraph seven of the original Application for Consent Agreement and Order. I respectfully request that paragraph seven be replaced with the following language, "In consideration of the Board's acceptance of this disposition of my case, I further agree that within seven days of prescribing medications to myself or to members of my family, I shall notify in writing the Office of Professional Medical Conduct of said prescription. I shall maintain a medical record for myself or members of my family justifying the writing of said prescriptions or any treatment rendered." The modification order to be issued will not constitute a new disciplinary action against me.

I make this application to the State Board for Professional Medical Conduct (Board) and request that it be granted.

I understand that, in the event that the 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.

I make this application to the Board and request that it be granted by execution by the Chairperson of the Board of the attached modification order.

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 Board's granting of this application to modify my prior order, I fully, freely waive any right I may have to appeal or otherwise challenge the validity of the said modification order.

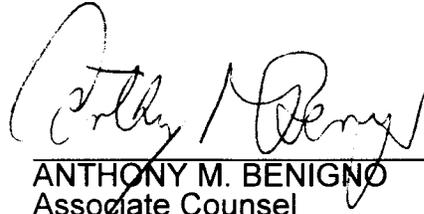
DATE: 4/26, 2002



ROBERT NIELSON, M.D.
Respondent

The undersigned agree to the attached application of the Respondent to modify the original order.

Date: 4/24, 2002



ANTHONY M. BENIGNO
Associate Counsel
Bureau of Professional Medical Conduct

Date: 5/2, 2002



DENNIS J. GRAZIANO
Director
Office of Professional Medical Conduct

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

-----X APPLICATION
IN THE MATTER : FOR
OF : CONSENT
ROBERT NIELSON, M.D. : AGREEMENT
AND ORDER
-----X
BPMC # 00-112

ROBERT NIELSON, M.D., the Respondent in this matter, being duly sworn,
deposes and says:

1. I was authorized to practice medicine in New York State on or about September 18, 1981, by the issuance of license number 147659 by the New York State Education Department.

2. My current residence is at 8 Bear Cub Crossing, Saratoga Springs, New York 12866.

3. I understand that the Board has now charged me with two (2) specifications of professional misconduct; a copy of the Statement of Charges is annexed hereto as Exhibit "A", and made a part hereof.

4. I hereby make application for a Consent Order to dispose of this matter, and to that end I agree: (i) not to contest the Second Specification set forth in Exhibit "A", to the extent that it is premised on Factual Allegation D; (ii) not to contest the Board's imposition of the penalty Censure and Reprimand provided this penalty is limited to the Second Specification and premised on Factual Allegation D; and (iii) to pay a fine in the amount \$2,500.00 within thirty (30) days of the effective date of the Board's Order disposing of this matter.

5. I specifically deny the First Specification set forth in Exhibit "A", and Factual

Allegations A, B, and C.

6. I hereby agree that failure by me to pay the \$2,500.00 fine within thirty (30) days of the effective date of the Board's Order shall constitute misconduct as defined by N.Y. Education Law Sec. 6530(29).

7. In consideration of the Board's acceptance of this disposition of my case I further agree to refrain from self-prescribing medications to myself or to members of my family. Prescription medications in my possession intended for my use, and prescription medications intended for use by members of my family shall without exception be procured strictly pursuant to prescriptions issued by authorized third party prescribers.

8. Imposition of the penalty Censure and Reprimand, and payment of the \$2,500.00 fine shall constitute full satisfaction of the charges against me in this matter.

9.. I further agree that in the event I am charged with professional misconduct in the future, this document together with Exhibit "A" , and the Board's Order, shall be admitted into evidence at the administrative proceeding convened to determine those charges of misconduct.

10. I understand that in the event 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, nor be used against me in any way, but shall be kept in strict confidence during the pendency of the professional misconduct disciplinary proceeding convened to determine this matter, and that 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.

11. I agree that in the event the Board grants my Application, an Order of the Chairperson of the Board shall be effective upon issuance, which may be accomplished by

mailing, by first class mail, a copy of the Order to me at the address set forth in this Application, to my attorney, or upon transmission by facsimile to me or to my attorney, whichever occurs earliest.

13. I hereby affirm that I am making this Application of my own free will and not under any duress, compulsion, or restraint of any kind, and that my decision to make this Application has been made after consultation with my attorney. In consideration of the relief this disposition affords me from the risks and burdens of participation in an administrative proceeding to determine these charges, I knowingly and voluntarily waive any rights I might otherwise have administratively or judicially to contest or appeal this disposition of my case.

14. I now make this Application to the Board, and request that it be granted.

AFFIRMED:

Date: 3/10/00



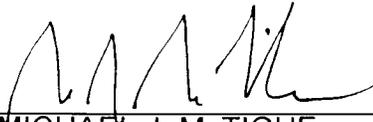
ROBERT NIELSON, M.D.
RESPONDENT

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

DATE: _____

SHARI F MAHDAVIAN, ESQ.
Attorney for the Respondent

DATE: 3/31/00


MICHAEL J. McTIGHE
Senior Attorney
Bureau of Professional Medical Conduct

DATE: April 4, 2000


ANNE F. SAILE
Director
Office of Professional Medical Conduct

NYS DOH/BPMC

Fax:518-473-2430

Mar 17 '00 11:20

P.01

Post-It Fax Note	7671	Date	3/17/00	pages	1
To	Wilfred Friedman Esq.	From	Mike McTighe		
Co./Dept	per telephone	Co.			
Phone #	(212) 302-0100	Phone #	(518) 474-5168		
Fax #	(212) 302-1119	Fax #	(518) 473-2430		

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

DATE: _____

SHARI F. MAHDAVIAN, ESQ. Attorney for the Respondent *by Wilfred T. Friedman*

DATE: _____

MICHAEL J. MCTIGHE Senior Attorney Bureau of Professional Medical Conduct

DATE: _____

ANNE F. SAILE Director Office of Professional Medical Conduct

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

X

IN THE MATTER :
OF : CONSENT
ROBERT NIELSON, M.D. : ORDER

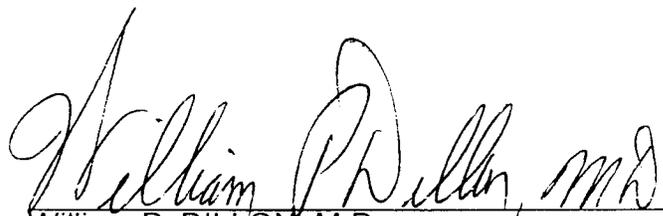
X

Upon the Application of ROBERT NIELSON, M.D. (Respondent) for this Consent Order, which Application is made a part hereof, it is agreed to and ORDERED, that the Application and the provisions thereof are hereby adopted and so ORDERED, and it is further

ORDERED, that this Order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the Consent Order to Respondent at the address set forth in his Application, or to Respondent's attorney by certified mail, or upon transmission by facsimile to Respondent or to Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 4/10/00



William P. DILLON, M.D.

Chair

State Board for Professional Medical Conduct

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

-----X

IN THE MATTER : STATEMENT
OF : OF
ROBERT NIELSON, M.D. : CHARGES

-----X

ROBERT NIELSON, M.D., the Respondent, was authorized to practice medicine in New York State by the issuance of license number 147659 on September 21, 1981, by the New York State Education Department. Respondent currently resides at 8 Bear Cub Crossing, Saratoga Springs, New York 12866.

FACTUAL ALLEGATIONS

A. In 1997-1998, Respondent prescribed the medication Hydrocodone Bitartrate for his wife, Rene Nielson, without documenting medical necessity or justification for these prescriptions in his wife's medical record. Respondent wrote these prescriptions on or about the following specific dates:

. 1/5/97, &/or 4/2/87, &/or 7/15/97, &/or 7/25/97,
&/or 8/7/97, &/or 9/8/97, &/or 9/17/97, &/or
8/23/97, &/or 11/8/97, &/or 11/22/97, 11/29/97, &/or
12/15/97, &/or 12/28/97, &/or 1/5/98, &/or 1/8/98,
&/or 1/14/98, &/or 1/22/98, &/or 2/5/98, &/or
2/10/98, &/or 2/13/98, &/or 3/2/98, &/or 3/23/98,
&/or 3/25/98, &/or 3/28/96, &/or 4/8/98, &/or
4/18/98, &/or 5/23/98, &/or 5/26/09, &/or 6/21/98,
&/or 6/22/98, &/or 7/12/98, &/or 7/25/98, &/or
8/24/98, &/or 9/3/98.

B. In 1998, Respondent prescribed the medication Hydrocodone Bitartrate for a son, Tyler Nielson, without documenting medical necessity or justification for the prescriptions in his son's medical record. Respondent wrote these prescriptions on or about the following specific dates:

4/7/98, &/or 4/10/98, &/or 6/6/98, &/or 6/9/98, &/or 6/15/98, &/or 8/9/98, &/or 8/30/98.

C. In 1998, Respondent prescribed the medication Hydrocodone Bitartrate for a son, Joshua Nielson, without documenting medical necessity or justification for these prescriptions in his son's medical record. Respondent wrote these prescriptions on or about the following specific dates:

5/12/98 &/or 5/13/98, &/or 5/18/98, &/or 7/12/98.

D. In 1997-1998, Respondent self-prescribed the medication Hydrocodone Bitartrate without documented medical necessity or justification for these prescriptions. Respondent wrote these prescriptions on or about the following specific dates:

10/24/97 &/or 11/6/97, &/or 11/26/97, &/or 4/22/98, &/or 4/24/98, &/or 6/4/98, &/or 6/7/98, &/or 7/10/98, &/or 7/16/98.

SPECIFICATIONS

FIRST SPECIFICATION

Respondent is charged with professional misconduct as defined by N.Y. Education Law Sec. 6530(16) by willfully failing to comply with substantial provisions of federal, state, or local laws, rules, or regulations governing the practice of medicine, as alleged in the facts of the following:

1. Paragraphs A &/or B &/or C &/or D.

SECOND SPECIFICATION

Respondent is charged with professional misconduct as defined by N.Y. Education Law Sec. 6530(32) by failing to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient.

2. Paragraphs A &/or B &/or C &/or D.

DATED: March 31, 2000
Albany, New York



PETER D. VAN BUREN
Deputy Counsel
Bureau of Professional
Medical Conduct