



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

November 28, 2007

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Tyler Ira Freeman, M.D.
9151 Providence Colony Drive
Charlotte, NC 28277

Re: License No. 084586

Dear Dr. Freeman:

Enclosed is a copy of Modification Order #BPMC 06-51 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect December 5, 2007.

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

IN THE MATTER
OF
TYLER IRA FREEMAN, M.D.

MODIFICATION
ORDER

BPMC No. #06-51

Upon the proposed Application for a Modification Order of **TYLER IRA FREEMAN, M.D.**
(Respondent) which 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 by first class mail 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: 11-28-07



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

IN THE MATTER
OF
TYLER IRA FREEMAN, M.D.

APPLICATION FOR
MODIFICATION ORDER

TYLER IRA FREEMAN, M.D., (Respondent) being duly sworn deposes and says:

That on or about September 22, 1960, I was licensed to practice as a physician in the State of New York, having been issued License No. 084586 by the New York State Education Department.

My current address is 9151 Providence Colony Drive, Charlotte, NC 28277.

I am currently subject to Consent Order BPMC No. 06-51, (hereinafter "Original Order"), annexed hereto, made a part, hereof, and marked as Exhibit 1, that was issued on March 8, 2006.

I have completed all the requirements of the Original Order and am eligible to petition the Director, OPMC, for a Modification Order staying the suspension imposed therein. As I do not intend to practice medicine in New York State, I apply instead, 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:

" That Respondent shall maintain active registration of Respondent's license with the New York State Education, Department Division of Professional Licensing Services (except during periods of actual suspension) and 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;"

substituting therefor:

" I shall never activate my registration to practice medicine in New York state or seek to reapply for a license to practice medicine 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, whether administratively or 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 either to 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.

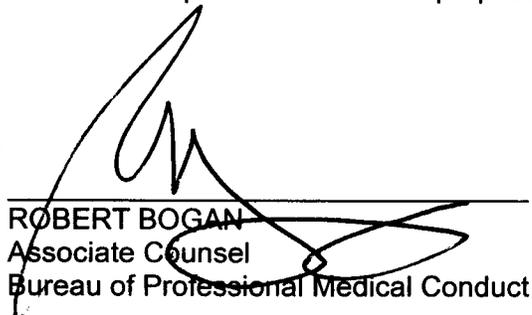
AFFIRMED:

DATED: 11-13-07


TYLER IRA FREEMAN, 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: 16 November 2007


ROBERT BOGAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 11/21/07


KEITH W. SERVIS
Director
Office of Professional Medical Conduct



"Exhibit 1"
New York State Board for Professional Medical Conduct
433 River Street, Suite 303 • Troy, New York 12180-2299 • (518) 402-0863

Antonia C. Novello, M.D., M.P.H., Dr. P.H.
Commissioner
NYS Department of Health

Dennis P. Whalen
Executive Deputy Commissioner
NYS Department of Health

Dennis J. Graziano, Director
Office of Professional Medical Conduct

Public

Kendrick A. Sears, M.D.
Chairman

Michael A. Gonzalez, R.P.A.
Vice Chair

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

March 8, 2006

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Tyler Ira Freeman, M.D.
9151 Providence Colony Drive
Charlotte, North Carolina 28277

Re: License No. 084586

Dear Dr. Freeman:

Enclosed is a copy of Order #BPMC 06-51 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect March 15, 2006.

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 to the Board for Professional Medical Conduct, New York State Department of Health, Hedley Park Place, Suite 303, 433 River Street, Troy, New York 12180.

Sincerely,

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

Enclosure

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

IN THE MATTER
OF
TYLER IRA FREEMAN, M.D.
CO-05-11-6162-A

CONSENT
AGREEMENT
AND ORDER
BPMC No. 06-51

TYLER IRA FREEMAN, M.D., (Respondent) representing that all of the following statements are true, deposes and says:

That on or about September 22, 1960, I was licensed to practice as a physician in the State of New York, and issued License No. 084586 by the New York State Education Department.

My current address is 9151 Providence Colony Drive, Charlotte, NC 28277, and I will advise the Director of the Office of Professional Medical Conduct of any change of my address thirty (30) days, thereof.

I understand that the New York State Board for Professional Medical Conduct has charged me with two (2) 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 Factual Allegations A and B(3) and the Second Specification, in full satisfaction of the charges against me, and agree to the following penalty:

My license shall be suspended for an indefinite period of no less than one (1) year and until I have successfully completed the terms and conditions imposed on my license to practice medicine in the State of North Carolina, by a Consent Order, dated October 19, 2005.

One year after the effective date of this order and after compliance with all conditions I may, in writing, petition the Director, OPMC, for a Modification Order, staying the suspension and permitting me to practice as a physician under whatever limitation(s), term(s) of probation, or further conditions the Director, in his reasonable discretion, may impose.

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

That Respondent shall maintain active registration of Respondent's license 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 all 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 the future, this Consent Agreement and Order shall be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

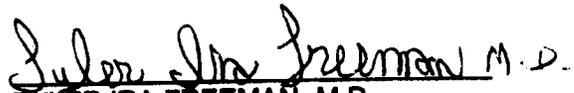
I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall 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 patients identities, if any, redacted.

I stipulate that the proposed sanction and Order are authorized by Public Health Law Sections 230 and 230-a and that the Board for Professional Medical Conduct and the Office of Professional Medical Conduct 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 ask that the Board adopt this Consent Agreement.

AFFIRMED:

DATED: March 1, 2006



TYLER IRA FREEMAN, M.D.
Respondent

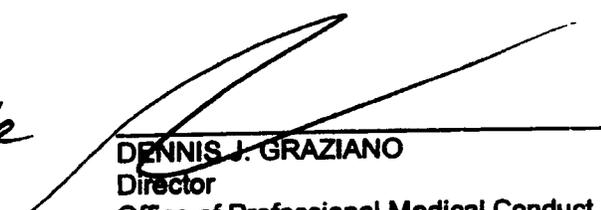
The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions thereof.

DATE: 2 March 2006



ROBERT BOGAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 03 March 2006



DENNIS J. GRAZIANO
Director
Office of Professional Medical Conduct

STATE OF NEW YORK

DEPARTMENT OF HEALTH

STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER
OF
TYLER IRA FREEMAN, M.D.
CO-05-11-6162-A

STATEMENT
OF
CHARGES

TYLER IRA FREEMAN, M.D., Respondent, was authorized to practice medicine in New York state on September 22, 1960, by the issuance of license number 084586 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about October 19, 2005, the North Carolina Medical Board (hereinafter "North Carolina Board"), by a Consent Order (hereinafter "North Carolina Order"), inter alia, **SUSPENDED INDEFINITELY** Respondent's license to practice medicine for at least six (6) months, based on aiding and abetting the unlicensed practice of medicine.

B. The conduct resulting in the North Carolina Medical Board disciplinary action against Respondent would constitute misconduct under the laws of New York State, pursuant to the following sections of New York State law:

1. New York Education Law §6530(16) (willfully or grossly negligent failure to comply with substantial provisions of federal, state, or local laws, rules, or regulations governing the practice of medicine);
2. New York Education Law §6530(20) (moral unfitness); and/or
3. New York Education Law §6530(25) (delegating professional responsibilities to a person when the licensee delegating such responsibilities knows or has reason to know that such person is not qualified, by training, experience, or by licensure, to perform them).

SPECIFICATIONS
FIRST SPECIFICATION

Respondent violated New York Education Law §6530(9)(b) by having been found guilty of improper professional practice or professional misconduct by a duly authorized professional disciplinary agency of another state where the conduct upon which the findings was based would, if committed in New York state, constitute professional misconduct under the laws of New York state, in that Petitioner charges:

1. The facts in Paragraphs A and/or B.

SECOND SPECIFICATION

Respondent violated New York Education Law §6530(9)(d) by having his license to practice medicine suspended or having other disciplinary action by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the suspension or other disciplinary action would, if committed in New York state, constitute professional misconduct under the laws New York state, in that Petitioner charges:

2. The facts in Paragraphs A and/or B.

DATED: *February 6*, 2006
Albany, New York


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

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

IN THE MATTER
OF
TYLER IRA FREEMAN, M.D.

CONSENT
ORDER

Upon the application of TYLER IRA FREEMAN, 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 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: 3-8-2006


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