



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.
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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

Kendrick A. Sears, M.D.
Chair

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

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

Public

November 29, 2006

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Shirley Yezdi Godiwalla, M.D.
W283 N3671 Yorkshire Trace
Pewaukee, WI 53072

Re: License No. 177995

Dear Dr. Godiwalla:

Enclosed is a copy of Order #BPMC 06-270 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect December 6, 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

cc: Carolyn Shearer, Esq.
Bond, Schoeneck & King, PLLC
111 Washington Avenue
Albany, NY 12210-2211

IN THE MATTER

CONSENT

OF

ORDER

SHIRLEY YEZDI GODIWALLA, M.D.

BPMC No. #06-270

Upon the application of (Respondent), **SHIRLEY YEZDI GODIWALLA, 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 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.

DATED: 11-29-06



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

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

IN THE MATTER
OF
SHIRLEY YEZDI GODIWALLA, M.D.
CO-04-09-4642-A

CONSENT
AGREEMENT
AND ORDER

SHIRLEY YEZDI GODIWALLA, M.D., representing that all of the following statements are true, deposes and says:

That on or about April 14, 1989, I was licensed to practice as a physician in the State of New York, and issued License No. 177995 by the New York State Education Department.

My current address is W283 N3671 Yorkshire Trace, Pewaukee, WI 53072, 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 (Board) has charged me with two (2) Specifications of professional misconduct, based solely upon the State of Wisconsin, Medical Examining Board, July 27, 2004, Final Decision and Order.

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 Second Specification in full satisfaction of the charges against me, and agree to the following penalty:

My license to practice medicine in the State of New York is LIMITED in that Respondent is prohibited from practicing pediatric urology, including pediatric urological surgery. This limitation shall apply to any and all patients aged eighteen (18) years of age and younger.

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

That Respondent shall remain in continuous compliance with all requirements of New York Education 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 New York Education 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 New York 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 New York Public Health Law.

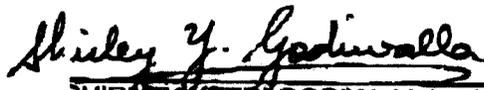
I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that this Consent Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent Order by first class mail to me at the 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 New York Public 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.

AFFIRMED:

DATED: 11/9/2006


SHIRLEY YEZID GODIWALLA, M.D.
Respondent

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

DATE 11/10/06

CS
CAROLYN SHEARER
Attorney for Respondent

DATE: 17 November 2006


ROBERT BOGAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 27 November 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

**SHIRLEY YEZDI GODIWALLA, M.D.
CO-04-09-4642-A**

STATEMENT

OF

CHARGES

SHIRLEY YEZDI GODIWALLA, M.D., the Respondent, was authorized to practice medicine in New York state on April 14, 1989, by the issuance of license number 177995 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about July 27, 2004, the State of Wisconsin, Medical Examining Board (hereinafter "Wisconsin Board"), by a Final Decision and Order (hereinafter "Wisconsin Order"), limited Respondent's license to practice medicine and surgery in that she is prohibited from practicing pediatric urology including pediatric urology surgery, based on negligence and unprofessional conduct.

B. The conduct resulting in the Wisconsin Board disciplinary action against Respondent would constitute misconduct under the laws of New York state, pursuant to the following section of New York state law:

1. New York Education Law §6530(4) (negligence on more than one occasion).

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 professional disciplinary agency of another state where the conduct upon which the finding 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 disciplinary action taken by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the disciplinary action would, if committed in New York state, constitute professional misconduct under the laws of New York state, in that Petitioner charges

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

DATED: *Dec. 14*, 2004
Albany, New York


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