



**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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Dennis P. Whalen  
*Executive Deputy Commissioner*  
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Anne F. Saile, Director  
*Office of Professional Medical Conduct*

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

December 21, 1999

**CERTIFIED MAIL - RETURN RECEIPT REQUESTED**

Laura Garabedian, M.D.  
79-04 256th Street  
Floral Park, NY 11104

RE: License No. 173511

Dear Dr. Garabedian:

Enclosed please find Order #BPMC 99-319 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect **December 21, 1999.**

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 of receipt of the Order.

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 1315  
Empire State Plaza  
Albany, New York 12237

Sincerely,



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

Enclosure

cc: T. Lawrence Tabak, Esq.  
Kern, Augustine, Conroy & Schoppmann, P.C.  
420 Lakeville Road  
Lake Success, NY 11042

Marcia Kaplan, Esq.

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

IN THE MATTER  
OF  
LAURA GARABEDIAN, M.D.

CONSENT  
AGREEMENT  
AND  
ORDER  
BPMC #99-319

STATE OF NEW YORK )  
COUNTY OF ) ss.:

LAURA GARABEDIAN, M.D., (Respondent) being duly sworn, deposes and says:

That on or about January 25, 1988, I was licensed to practice as a physician in the State of New York, having been issued License No. 173511 by the New York State Education Department.

My current address is 79-04 256th Street, Floral Park, N.Y. 11004, and I will advise the Director of the Office of Professional Medical Conduct of any change of my address.

I understand that the New York State Board for Professional Medical Conduct has charged me with two specifications of professional misconduct.

A copy of the Statement of Charges is annexed hereto, made a part hereof, and marked as Exhibit "A".

I do not contest the two specifications, in full satisfaction of the charges against me. I hereby agree to the following penalty:

A Censure and Reprimand, a two year period of probation subject to terms of probation as set forth in attached Exhibit B, and a \$5000 fine as further set forth in Exhibit "B."

I further agree that the Consent Order for which I hereby apply shall impose the following conditions:

That, except during periods of actual suspension, Respondent shall maintain current registration of Respondent's license with the New York State Education Department Division of Professional Licensing Services, and pay all registration fees. This condition shall be in effect beginning thirty days after the effective date of the Consent Order and will continue while the licensee possesses her license; and

That Respondent shall fully cooperate in every respect with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Order and in its investigation of all matters regarding Respondent.

Respondent shall respond in a timely manner to each and every request by OPMC to provide written periodic verification of Respondent's compliance with the terms of this Order. Respondent shall meet with a person designated by the Director of OPMC as directed. Respondent shall respond promptly and provide any and all documents and information within Respondent's control upon the direction of OPMC. This condition shall be in effect beginning upon the effective date of the Consent Order and will continue while the licensee possesses her license.

I hereby stipulate that any failure by me to comply with such conditions shall constitute misconduct as defined by New York State Education Law §6530(29)(McKinney Supp 1999).

I agree that in the event I am charged with professional misconduct in the future, this agreement and order shall be admitted into evidence in that proceeding.

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

I understand that, in the event that 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, such Application shall not be used against me in any way and shall be kept in strict confidence during the pendency of the professional misconduct disciplinary proceeding; and 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.

I agree that, in the event the Board grants my Application, as set forth herein, an order of the Chairperson of the Board shall be issued in accordance with same. I agree that such 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 me at the address set forth in this agreement, or to my attorney, or upon transmission via facsimile to me or my attorney, whichever is earliest.

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 value to me of the acceptance by the Board of this Application, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive any right I may have to contest the Consent Order for

which I hereby apply, whether administratively or judicially, and ask that the Application be granted.

*Laura Garabedian*

LAURA GARABEDIAN, M.D.  
RESPONDENT

DATED 12/10/99

Sworn to before me  
on this 10<sup>th</sup> day of December  
1999

*Lawrence J. Tator*  
NOTARY

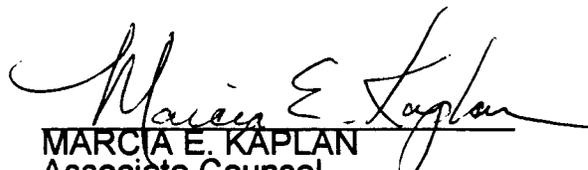
Notary Public, State of New York  
No. 314989056  
Exp. 12/31/2001  
2001

The undersigned agree to the attached application of the Respondent and to the proposed penalty based on the terms and conditions thereof.

DATE: 12/10/99

  
T. LAWRENCE TABAK, ESQ.  
Attorney for Respondent

DATE: Dec. 14, 1999

  
MARCIA E. KAPLAN  
Associate Counsel  
Bureau of Professional  
Medical Conduct

DATE: December 16, 1999

  
ANNE F. SAILE  
Director  
Office of Professional  
Medical Conduct

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

IN THE MATTER  
OF  
LAURA GARABEDIAN, M.D.

CONSENT  
ORDER

Upon the proposed agreement of LAURA GARABEDIAN, M.D.  
(Respondent) for 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 this agreement or to  
Respondent's attorney by certified mail, or upon transmission via facsimile to  
Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 12/16/99



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

**EXHIBIT "A"**

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

**IN THE MATTER  
OF  
LAURA GARABEDIAN, M.D.**

**STATEMENT  
OF  
CHARGES**

LAURA GARABEDIAN, M.D., the Respondent, was authorized to practice medicine in New York State on or about January 25, 1988, by the issuance of license number 173511 by the New York State Education Department.

**FACTUAL ALLEGATIONS**

- A. On or about July 2, 1997, a site visit by New York State Department of Health professional staff at Respondent's office at 79-04 256th Street, Floral Park, N.Y. 11004 revealed conditions establishing that Respondent had failed to use scientifically accepted barrier precautions and infection control practices as established by the department of health pursuant to section two hundred thirty-a of the public health law.
- B. On repeated occasions prior to January 1998, Respondent willingly, knowingly, and with intent to mislead used the designation F.A.A.P. (i.e. Fellow of the American Academy of Pediatrics) after her name on her letterhead and otherwise in her practice even though she knew that she was not Board-certified and therefore not eligible to use this credential.

**SPECIFICATION OF CHARGES**

**FIRST SPECIFICATION**

**FAILURE TO USE SCIENTIFICALLY ACCEPTED  
BARRIER PRECAUTIONS AND INFECTION CONTROL PRACTICES**

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(47)(McKinney Supp. 1999) by failing to use scientifically accepted barrier precautions and infection control practices as established by the department of health pursuant to section two hundred thirty-a of the public health law, as alleged in the facts of:

1. Paragraph A.

**SECOND SPECIFICATION**

**FRAUDULENT PRACTICE**

Respondent is charged with committing professional misconduct as defined by N.Y. Educ. Law §6530(2)(McKinney Supp. 1999) by practicing the profession of medicine fraudulently as alleged in the facts of the following:

2. Paragraph B.

DATED: November , 1999  
New York, New York

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ROY NEMERSON  
Deputy Counsel  
Bureau of Professional  
Medical Conduct

## EXHIBIT "B"

### Terms of Probation

1. Respondent shall conduct herself in all ways in a manner befitting her professional status, and shall conform fully to the moral and professional standards of conduct and obligations imposed by law and by her profession.
2. Respondent shall submit written notification to the New York State Department of Health addressed to the Director of the Office of Professional Medical Conduct, New York State Department of Health, 433 River Street, Suite 303, Troy, NY 12180-2299; said notice is to include a full description of any employment and practice, professional and residential addresses and telephone numbers within or without New York State, and any and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty days of each action.
3. Any civil penalty, including the \$5000 fine imposed pursuant to this Order if not paid in accordance with the provisions of paragraph 10 below, shall be subject to all provisions of law relating to debt collection by New York State including, but not limited to, the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; non-renewal of permits or licenses [Tax Law section 171(27)]; State Finance Law section 18; CPLR section 5001; Executive Law section 32]; and shall subject Respondent to a violation of probation proceeding, as more fully set forth below
4. The period of probation shall be tolled during periods in which Respondent is not engaged in the active practice of medicine in New York State. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in or intends to leave the active practice of medicine in New York State for a period of thirty (30) consecutive days or more. Respondent shall then notify the Director again prior to any change in that status. The period of probation shall resume and any terms of probation which were not fulfilled shall be fulfilled upon Respondent's return to practice in New York State.
5. Within thirty (30) days of the effective date of this Order, Respondent shall practice medicine only when monitored by a licensed physician, board certified in pediatrics, ("practice monitor") proposed by Respondent and subject to the written approval of the Director of OPMC.
  - a. Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, on a random unannounced basis at least monthly and shall examine a selection (no less than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.

- b. Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
  - c. Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.
  - d. Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC prior to Respondent's practice after the effective date of this Order.
6. Respondent's professional performance may be reviewed by the Director of OPMC. This review may include, but shall not be limited to, a review of office records, patient records and/or hospital charts, interviews with or periodic visits with Respondent and her staff at practice locations or OPMC offices.
7. Respondent shall use the scientifically accepted infection control practices established by the DOH at all locations where she practices medicine, and shall provide access for DOH personnel to all office locations where she practices to verify her compliance with this Order. This access shall include, but not be limited to, on-site inspections, observation and interviews.
8. Respondent shall maintain legible and complete medical records which accurately reflect the evaluation and treatment of patients. The medical records shall contain all information required by State rules and regulations regarding controlled substances.
9. Respondent shall pay the \$5000 fine imposed by this order whenever due, and failure to so pay shall constitute a "violation" of a term of probation or condition or limitation imposed on the licensee pursuant to section two hundred thirty of the public health law" within the meaning of §6530(29) of the N.Y. Educ Law. The fine shall be due within sixty days after issuance pursuant to §230(19) of the Public Health Law by the Director of OPMC, to the Respondent, of a determination that Respondent has failed to comply with any of the terms of this order. Upon completion of the two year term of probation without substantial violation of any term of this order, as determined by the Director in the exercise of reasonable discretion, the penalty of a \$5,000 fine will be forgiven in its entirety, and will not come due.
10. Respondent shall comply with all terms, conditions, restrictions, limitations and penalties to which she is subject pursuant to the Order and shall assume and bear all costs related to compliance. Upon receipt of evidence of noncompliance with, or any violation of these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding and/or any such other proceeding against Respondent as may be authorized pursuant to the law.