



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

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

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

June 20, 2005

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Robert Ortiz, M.D.
8310 35th Avenue, Apt. 1V
Jackson Heights, NY 11372

Re: Resident
Permit No. 18434

Dear Dr. Ortiz:

Enclosed is a copy of Order #BPMC 05-121 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect June 27, 2005.

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 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: Armand Kolodny, Esq.
64 Hilton Avenue
Hempstead, NY 11552

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

IN THE MATTER
OF
ROBERT ORTIZ, M.D.

CONSENT
ORDER

BPMC No. 05-121

Upon the application of Robert Ortiz, 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 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: 6-10-2005


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

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

**IN THE MATTER
OF
ROBERT ORTIZ, M.D.**

**CONSENT
AGREEMENT
AND
ORDER**

Robert Ortiz, M.D., representing that all of the following statements are true, deposes and says:

That on or about February 14, 2001 to February 14, 2003, I was licensed to practice as a resident in the State of New York, and issued Permit No. 18434 by the New York State Education Department.

My current address is 8310 35th Avenue, Apt. IV, Jackson Heights, NY 11372, and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

I understand that the New York State Board for Professional Medical Conduct has charged me with One (1) specification of professional misconduct.

A copy of the Statement of Charges, marked as Exhibit "A", is attached to and part of this Consent Agreement.

I plead guilty, in full satisfaction of the charges against me, and agree to the following penalty:

1. Censure and Reprimand.

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 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 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

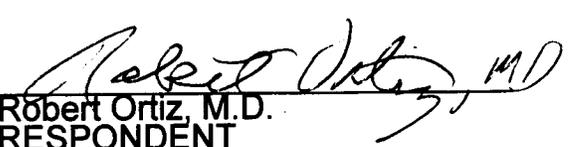
way and shall be kept in strict confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to the Public Health Law.

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 patient 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.

DATED

5/21/05


Robert Ortiz, M.D.
RESPONDENT

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

DATE: _____


ARMAND KOLODNY, ESQ.
Attorney for Respondent

DATE: 5/27/05


AMY B. MERKLEN, ESQ.
Bureau of Professional Medical Conduct

DATE: 6/08/05


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
ROBERT ORTIZ, M.D.

**STATEMENT
OF
CHARGES**

ROBERT ORTIZ, M.D., Respondent, was authorized to practice medicine in New York State on or about February 14, 2001 by the issuance of limited permit number 18434 by the New York State Education Department. The limited permit expired February 14, 2003. Respondent's registration address is 8310 35th Avenue, Apt. IV, Jackson Heights, New York 11372.

FACTUAL ALLEGATIONS

The Respondent received a loan from Federal Department of Health and Human Services (hereinafter "DHHS") which services the Health Education Assistance Loan program. Respondent defaulted on this loan in March 1999. As of February 28, 2001, the total principal due on the loan was \$129,818.17 plus interest and fees. DHHS has made many attempts to reach Respondent and resolve this matter, however, all attempts have been unsuccessful.

SPECIFICATION OF MISCONDUCT

FIRST SPECIFICATION

FAILURE TO REPAY STUDENT LOAN

The Respondent is charged with professional misconduct by failing to comply with a written agreement with the DHHS by refusing to repay medical education loans in violation of § 6530(42) in that Petitioner charges:

1. The allegations in paragraph A.

DATED: *Nov. 10*, 2003

Albany, New York


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