



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

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

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

PUBLIC

December 24, 2003

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

George Geoffrey Neiderman, M.D.
3201 Kings Highway
Brooklyn, NY 11234

Re: License No. 184789

Dear Dr. Neiderman:

Enclosed please find Order #BPMC 03-352 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect December 31, 2003.

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: Alan Lambert, Esq.
McAloon & Friedman, P.C.
123 William Street
New York, NY 10038-3804

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

IN THE MATTER
OF
GEORGE GEOFFREY NEIDERMAN, M.D.

CONSENT
ORDER

BPMC No. 03-352

Upon the application of (Respondent) GEORGE GEOFFREY NEIDERMAN, 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 SO ORDERED, 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: 12/24/03


MICHAEL A. GONZALEZ, R.P.A.
Vice Chair
State Board for Professional Medical Conduct

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

**IN THE MATTER
OF
GEORGE GEOFFREY NEIDERMAN, M.D.**

**CONSENT
AGREEMENT
AND
ORDER**

GEORGE GEOFFREY NEIDERMAN, M.D., representing that all of the following statements are true, deposes and says:

That on or about January 17, 1991, I was licensed to practice as a physician in the State of New York, and issued License No. 184789 by the New York State Education Department.

My current practice address is 3201 Kings Highway, Brooklyn, N.Y. 11234, 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 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 do not contest the First Specification, in full satisfaction of the charges against me, and agree to the following penalty:

I shall be subject to a Censure and Reprimand, pursuant to Public Health Law §230-a(1), and

I shall be subject to a requirement that I pursue a course of education or training, pursuant to Public Health Law §230-a(8), as further set forth in attached Exhibit "B".

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

That Respondent shall maintain active registration of his 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.

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 12/11/03


GEORGE GEOFFREY NEIDERMAN, M.D.
RESPONDENT

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

DATE: 12/12/03



ALAN LAMBERT, ESQ.
Attorney for Respondent

DATE: December 15, 2003



MARCIA E. KAPLAN
Associate Counsel
Bureau of Professional Medical Conduct

DATE: December 22, 2003



DENNIS J. GRAZIANO
Director
Office of Professional Medical Conduct

EXHIBIT "A "

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

IN THE MATTER
OF
GEORGE GEOFFREY NEIDERMAN, M.D.

STATEMENT
OF
CHARGES

GEORGE GEOFFREY NEIDERMAN, M.D., the Respondent, was authorized to practice medicine in New York State on or about January 17, 1991, by the issuance of license number 184789 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. During the period from on or about June 12, 2000 through on or about June 20, 2000, Respondent failed to diagnose and treat Patient A for diabetes during Patient A's hospitalization at Beth Israel Medical Center - Kings Highway Division, Brooklyn, New York.

SPECIFICATION OF CHARGES

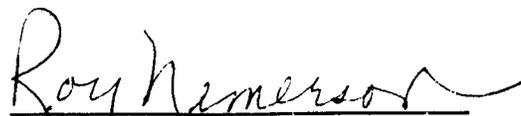
FIRST SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(3) by practicing the profession of medicine with negligence on more than one occasion, as follows:

1. Paragraph A.

DATED: ¹² October 19, 2003
New York, New York



Roy Nemerson
Deputy Counsel
Bureau of Professional Medical Conduct

EXHIBIT "B"

CONDITIONS

1. Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by New York State Education Law §6530 or §6531 shall constitute a violation of New York State Education Law §6530(29).
2. Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Hedley Park Place, 433 River Street Suite 303, Troy, New York 12180-2299 with the following information, in writing, and ensure that such information is kept current: a full description of Respondent's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty (30) days of each action.
3. Respondent shall cooperate fully with, and respond in a timely manner to, OPMC requests to provide written periodic verification of Respondent's compliance with the terms of this Consent Order. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
4. Respondent shall enroll in and complete a continuing education program in the area of diabetes management, subject to the Director of OPMC's prior written approval, which shall be completed within one year from the effective date of this Order.
5. Respondent shall comply with this Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or violation of, these terms, the Director of OPMC and/or the Board may initiate such proceedings against Respondent as may be authorized by law.