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STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC
SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF DENTISTRY
DOCKET NUMBER

In the Matter of)
ARTHUR SUCKOW, III, D.D.S.)
Licensed to Practice Dentistry)
in the State of New Jersey)
_____)

Administrative Action
CONSENT ORDER

This matter was opened to the New Jersey State Board of Dentistry upon receipt of a patient complaint from Juliana Lacey concerning dental treatment rendered at the dental offices of Dr. Arthur Suckow, III. Said treatment consisted, in pertinent part, of bonding on teeth #23, 24, 25 and 26 by Frank Rosen, D.D.S. an associate in the office of the respondent; the subsequent extraction of teeth #23 through #26 by Arthur Suckow, III, D.D.S.; and two months later the provision of a new lower denture by Deborah Rosenberg, D.D.S., an associate in the office of the respondent. A review of the entire record in this matter included the patient records, the Board's consultant's report, the Medicaid records, and the testimony of the treating dentists

at investigative inquiries held on July 22, 1992 and August 10, 1992.

It appearing that the respondent desires to resolve this matter without recourse to formal proceedings and for good cause shown;

IT IS ON THIS 23^d DAY OF ~~NOVEMBER~~ ^{DECEMBER}, 1992,

HEREBY ORDERED AND AGREED THAT:

1. Respondent shall make restitution on behalf of the patient by submitting a certified check or money order in the amount of \$412.00 made payable to the New Jersey Department of Human Services, Division of Medical Assistance & Health Services (Medicaid) to the State Board of Dentistry at 124 Halsey Street, Sixth Floor, Newark, New Jersey 07102, no later than the first day of the month following the entry date of this Order.

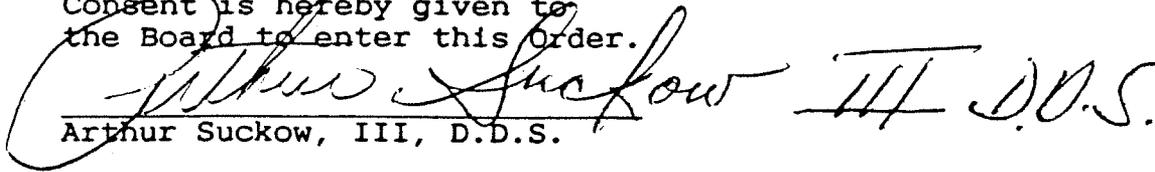
2. The respondent is hereby assessed a civil penalty in the amount of \$1,500.00 for violation of N.J.A.C. 13:30-8.15(a) in that the respondent failed to take responsibility as the dentist of record for assuring the proper implementation of a dental treatment plan for the patient. Said civil penalty shall be submitted by certified check or money order made payable to the State of New Jersey and mailed to the Board of Dentistry no later than the first day of the month following the entry date of

this Order.



Jerome Horowitz, D.D.S.
President
State Board of Dentistry

I have read and understand
the within Order and agree
to be bound by its terms.
Consent is hereby given to
the Board to enter this Order.



Arthur Suckow, III, D.D.S.