DEBORAH T. PORITZ
ATTORNEY GENERAL OF NEW JERSEY

By: Debra W. Levine
Deputy Attorney General
Division of Law - 5th Floor
124 Halsey Street
P. O. Box 45029
Newark, New Jersey 07102
Telephone (201)648-4876

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NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE SUSPENSION OR REVOCATION OF THE LICENSE OF SALADIN ABDU-NAFI, M.D. TO PRACTICE MEDICINE AND SURGERY IN THE STATE OF NEW JERSEY	Administrative Action **CONSENT ORDER**

This matter was opened to the New Jersey State Board of Medical Examiners (hereinafter "Board")upon receipt of information from Dr. David I. Canavan, Medical Director of the Physicians Health Program of the Medical Society of New Jersey, that respondent, Saladin Abdu-Nafi, M.D. had relapsed in his use of a controlled dangerous substance, specifically, cocaine.

This matter was initially brought before the Board based upon respondent's abuse of cocaine. Respondent received in-patient treatment for drug addiction from May 15 to August 18, 1989. He relapsed shortly thereafter and reentered in-patient treatment in October 1989 for approximately four weeks. He subsequently relapsed again in April 1990 and again entered an in-patient treatment program for cocaine addiction. A Consent Order was filed on August 9, 1990, whereby respondent voluntarily surrendered his license

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based upon the aforementioned abuse and agreed to have the Physician's Health Program report any subsequent relapses.

Respondent petitioned the Board by way of a January 13, 1994 letter seeking the opportunity to appear before a committee of the Board for limited reinstatement of his license. He appeared before a committee of the Board on April 5, 1994 at which time he was accompanied by Dr. Canavan, Medical Director of the Physician's Health Program. Respondent admitted to the facts outlined above including his pattern of relapses and further testified that he had been drug and alcohol free for seventeen months. The Board considering the position statement of the Physician's Health Program and respondent's testimony before the Committee of the Board, agreed to a Consent Order of Limited Reinstatement which was filed on July 15, 1994 granting a strictly limited license under close supervision to respondent to practice medicine in the State of New Jersey.

Pursuant to the Order of Limited Reinstatement respondent's practice of medicine was restricted solely to the supervised setting of Eva's Kitchen at the Saint Joseph's Hospital and Medical Center in Paterson's outpatient clinic for the homeless and destitute. This limited license to practice medicine was conditioned upon respondent's continued compliance with the PHP, his continued abstinence from drugs and alcohol and numerous monitoring requirements pursuant to a Consent Order dated July 15, 1994.

On September 14, 1994 Dr. Canavan supplied an affidavit pursuant to the July 15, 1994 Order requiring him to report to the Board any information indicative of a relapse by respondent. Dr. Canavan reported that on September 13, 1994, he had received a call

from a counselor at Eva's Kitchen who indicated to Dr. Canavan that respondent had admitted that on Saturday, September 10, 1994, respondent had used cocaine again. Because of this violation of the code of conduct of Eva's Kitchen respondent was asked to leave that program and was relieved of all his medical duties. Respondent called Dr. Canavan on September 14, 1994 and admitted this relapse of drug abuse.

On September 21, 1994, the Board invoked Paragraph Three (3) of the July 15, 1994 Consent Order whereby respondent consented to the entry of an Order of Automatic Suspension of License without Notice, upon the Board's receipt of any information which the Board, in its sole discretion, deems reliable that respondent had failed to comply with any conditions of the Consent Order or any report of a confirmed positive urine, or a prima facie showing of relapse or recurrence of alcohol or drug abuse. The Board deemed the information received from Dr. Canavan by sworn affidavit to be reliable. Therefore the Board filed an Order of Suspension and Order to Show Cause Why Respondent's License Should not be Revoked Based upon Repeated Violations of a Consent Order Filed July 15, 1994.

Respondent's license to practice medicine in the State of New Jersey was automatically suspended, until such time as further action was taken by this Board. Further, respondent was ordered to appear on October 12, 1994 at 1:30 p.m. at the Hughes Justice Complex, 4th floor, Trenton, New Jersey to show cause why his license to practice medicine in the State of New Jersey should

not be revoked based upon his use of cocaine in violation of the July 15, 1994 Consent Order.

In lieu of appearing pursuant to the Order to Show Cause and it appearing that respondent admits to the facts outlined above, respondent hereby consents to the entry of this Order by the Board. The Board finding this Order adequately protective of the public interest, health and welfare and for good cause shown,

IT IS, THEREFORE, on this 28th day of October, 1994,

ORDERED:

1. Respondent is hereby granted leave to voluntarily surrender his license to practice medicine in the State of New Jersey, forthwith.

2. Respondent shall not be reissued his original CDS registration currently in possession of the State Board of Medical Examiners, 140 E. Front Street, 2nd Floor, Trenton, New Jersey 08608.

3. Respondent shall immediately advise the DEA of this Order.

4. Respondent shall not make application for reinstatement of license for a minimum of two (2) years.

5. Respondent shall continue to participate in the Physicians Health Program, which participation shall include:

a. urine monitoring twice a week for six months following the date of entry of this Order, followed by random weekly urine monitoring for an additional six months, followed by urine monitoring at the discretion of the Physician's Health Program;

b. documented attendance at regular A.A. (N.A.) meetings;

c. attendance at such other meetings as the Medical Director of the Physicians Health Program may designate;

d. total abstinence from mood altering chemicals, alcohol;

e. causing submission on his behalf every ninety (90) days by the Physicians Health Program of reports regarding his progress;

f. agreement by the Physicians Health Program to immediately notify the Board of any relapse of impairment including but not limited to reports of a positive urine or failure to appear or give a scheduled urine sample;

g. ensuring that urine monitoring shall be conducted with direct witnessing of the taking of the samples, and that the initial drug screen will be done by a laboratory utilizing a technique acceptable for evidential purposes and which confirms all positive urines by gas chromatography/mass spectrometry (GC/MS). Respondent shall also ensure that the testing procedure shall include a forensic chain of custody protocol to ensure sample integrity and to provide documentation to withstand a legal challenge. Any failure on respondent's part to ensure a forensic chain of custody protocol shall be deemed a waiver of his right to subsequently challenge the chain of custody and sample integrity. Respondent shall also ensure that the laboratory retains positive urines for six months after testing;

h. agreement by respondent by his signature on this order to waive any claim to confidentiality of any information regarding respondent's impairment obtained by the Physicians Health Program and allows disclosure to the Board of Medical Examiners, and allows the Board of Medical Examiners to utilize such information in connection with any licensure or disciplinary proceeding.

i. regular psychiatric or psychological counseling as directed by a psychologist or psychiatrist whose name has been provided to the Board.

6. Respondent shall comply with all parts of the Board directives applicable to disciplined licensees attached hereto.

7. This Order supersedes all prior Board Orders in this matter.

NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

Fred Jacobs, M.D.
President

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.

Saladin Abdu-Nafi, M.D.

Dr. David I. Canavan
Physicians Health Program

DIRECTIVE REGARDING FUTURE ACTIVITIES OF MEDICAL BOARD LICENSEE WHO HAS BEEN DISCIPLINED

A practitioner whose license is suspended or revoked or whose surrender of license with or without prejudice has been accepted by the Board shall conduct him/herself as follows:

1) Promptly deliver to the Board the original license and current biennial registration and, if authorized to prescribe drugs, the current State and Federal Controlled Dangerous Substances registrations.

2) Desist and refrain from the practice of the licensed profession in any form either as principal or employee of another.

3) Inform each patient at the time of any inquiry of the suspended or revoked or retired status of the license. When a new professional is selected by a patient, the disciplined practitioner shall promptly make available the original or a complete copy of the existing medical record to the new professional, or to the patient if no new professional is selected. Such delivery of record does not waive any right of the disciplined practitioner to claim compensation earned for prior services lawfully rendered.

4) Not occupy, share or use office space in which another licensee practices a licensed health care profession.

5) Desist and refrain from furnishing professional services, giving an opinion as to the professional practice or its application, or any advice with relation thereto: and from holding him/herself out to the public as being entitled to practice the profession or in any way assuming to be a practicing professional or assuming, using or advertising in relation thereto in any other language or in such a manner as to convey to the public the impression that such person is a legal practitioner or authorized to practice the licensed profession. This prohibition includes refraining during the period of suspension or revocation from placement of any advertisement or professional listing in any advertising medium suggesting eligibility for practice or good standing, such as listing in a professional directory of any type or a telephone directory or radio or television advertisement.

6) Not use any sign or advertise that such person, either alone or with any other person has, owns, conducts or maintains a professional office or office of any kind for the practice of the profession or that such person is entitled to practice, and such person shall promptly remove any sign suggesting ability of the disciplined practitioner to practice the profession.

7) Cease to use or allow another to use any stationery whereon such person's name appears as a professional in practice. If the practitioner was formerly authorized to issue written prescriptions for medication or treatment, such prescription pads shall be destroyed if the license was revoked. If the license was suspended, the prescriptions shall be destroyed or shall be stored in a secure location to prevent theft or any use whatsoever until issuance of a Board Order authorizing use by the practitioner. Similarly, medications possessed for office use shall be lawfully disposed of, transferred or safeguarded.

8) The disciplined licensee shall require that for a six-month period following the start of a suspension or revocation of license, a message be delivered to those telephoning the former office premises advising former patients where they may obtain their records. The message may inform callers that the practice is now being conducted by (another) named licensee, and the new telephone number of that licensee may be announced. The same information shall be disseminated by means of a notice to be published at least once per month for the same six month period in a newspaper of general circulation in the geographic vicinity in which the professional practice was conducted.

9) Not share in any fee for professional services performed by another professional following the suspension, revocation or surrender of license, but the practitioner may be compensated for the reasonable value of the services lawfully rendered and disbursements incurred on the patient's behalf prior to the effective date of the suspension, revocation or surrender.

10) Use of the professional premises. The disciplined licensee may allow another licensee to use the office premises formerly occupied by the disciplined licensee on the following conditions only:

(a) The new licensee shall conduct the practice in every respect as his/her own practice including billings, claim forms, insurance provider numbers, telephone numbers, tax identification number, etc.

(b) The disciplined licensee may accept no portion of the fees for professional services rendered by the new licensee, whether by percentage of revenue, per capita patient, or by any other device or design, however denominated. The disciplined licensee may, however, contract for or accept payment from the new licensee for rent (not exceeding fair market value) of the premises and/or equipment.

(c) No use of name of disciplined licensee or personally owned office name or tax or provider identification number.

1. Where the disciplined licensee was using an individual IRS number or where the licensee was the sole member of an incorporated professional association or a professional corporation, the disciplined licensee may contract to rent the office premises to a new practitioner. The new practitioner must use his/her own name and own provider number on all bills and insurance claim forms. Neither the name nor the number of the disciplined licensee may be used. When the license of a sole practitioner has been revoked, a trade name must be cancelled and a professional service corporation must be dissolved.

2. Where the disciplined licensee is a member of a professional group which uses a group-type name such as the ABC Medical Group, the disciplined licensee must arrange to have his/her name deleted, covered up or otherwise obliterated on all office signs, advertisements published by the group after the effective date of the Board Disciplinary Order and on all printed billings and stationery. The other group members may continue to function under the incorporated or trade name, minus the name of the disciplined licensee, and may continue to use its corporate or professional identification number.

11) Report promptly to the Board compliance with each directive requiring moneys to be reimbursed to patients or to other persons or third party payors or to any court, and regarding supervisory reports or other special conditions of the Order.

12) A practitioner whose license is surrendered, revoked or actively suspended for one year or more shall conduct him/herself as follows:

a) Promptly require the publishers of any professional directory and any other professional list in which such licensee's name is known by the disciplined licensee to appear, to remove any listing indicating that the practitioner is a licensee of the New Jersey State Board of Medical Examiners in good standing.

b) Promptly require any and all telephone companies to remove the practitioner's listing in any telephone directory indicating that such practitioner is a practicing professional.

13) A practitioner whose practice privileges are affected by a Board disciplinary Order shall, within 30 days after the effective date of the Board Order, file with the Executive Director of the Board a detailed affidavit specifying by correlatively lettered and numbered paragraphs how such person has fully complied with this directive. The affidavit shall also set forth the residence or other address and telephone number to which communications may be directed to such person. Any change in the residence address or telephone number shall be promptly reported to the Executive Director.

14) Where the Board has stayed any part of a suspension order to allow professional practice on probation or on specified practice conditions, the licensee shall fully cooperate with the Board or designated representatives, including the Enforcement Bureau, in ongoing monitoring of the licensee's status and practice.

a) Monitoring of practice conditions may include, but is not limited to, inspection of the professional premises and equipment, and inspection and copying of patient records (confidentiality of patient identity shall be protected by the Board) to verify compliance with Board Order and accepted standards of practice.

b) Monitoring of status conditions may include, but is not limited to, licensee cooperation in providing releases permitting unrestricted access to records and other information to the extent permitted by law, from any treatment facility, treating practitioner, support group or other individual/facility involved in the education, treatment, monitoring or oversight of the practitioner, or maintained by a rehabilitation program for impaired licensees. If bodily substance monitoring has been ordered, the licensee shall fully cooperate by responding to a demand for breath, blood, urine or other sample in a timely manner and providing the designated sample.