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Of Medical Examiners

FILED

March 18, 2009

**NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS**

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

IN THE MATTER OF THE LICENSE OF :
ELMER MANALO, M.D. :
License No. MA49407 : Administrative Action
: FINAL ORDER OF
: DISCIPLINE

TO PRACTICE MEDICINE AND SURGERY :
IN THE STATE OF NEW JERSEY :

This matter was opened to the New Jersey State Board of Medical Examiners (Board) upon receipt of information which the Board has reviewed and on which the following preliminary findings of fact and conclusions of law are made:

FINDINGS OF FACT

1. Respondent, Elmer Manalo, M.D. (Respondent) is the holder of License No. MA49407 and was licensed to practice medicine and surgery in the State of New Jersey on February 5, 1987. He allowed his license to expire on June 30, 1993.

2. By Order filed on September 11, 2008, the Medical Licensing Board of the State of Indiana (Indiana Board) permanently revoked respondent's license to practice medicine in the State of Indiana based upon a finding that he violated multiple sections of the Indiana Code. (Exhibit A.) Specifically, the Indiana Board found that:

CERTIFIED TRUE COPY

a. Respondent engaged in a course of lewd or immoral conduct in connection with the delivery of services to the public in violation of Indiana Code §25-1-9-4(a)(5), as evidenced by his inappropriate touching in an office setting of Detective Gretchen Yordy (Yordy) of the Indiana State Police while she made an undercover visit to Respondent's office in Greensburg, Indiana (Greensburg Office) and his solicitation of Yordy for dates.

b. Respondent had engaged in sexual contact with a patient under the practitioner's care or has used the practitioner-patient relationship to solicit sexual contact with a patient under practitioner's care in violation of Indiana Code §25-1-9-4(a)(11), as evidenced by the Respondent's own admission that he had sexual relations with ~~at least three (3) patients in the last several years.~~

c. Respondent had continued to practice although unfit due to failure to keep abreast of current theory or practice in violation of Indiana Code §25-1-9-4(a)(4)(B), as evidenced by Respondent's prescribing the controlled substances Tylenol 3, Percocet and Valium to Yordy without legitimate medical purposes. d. Respondent had continued to practice although unfit due to failure to keep abreast of current theory or practice in violation of Indiana Code §25-1-9-4(a)(4)(B), as evidenced by Respondent's prescribing the controlled substance Lortab to Drug Enforcement Agency (DEA) Task Force Agent 1 (TFO 1) without legitimate medical purposes and with the knowledge that her urine drug screen was negative for the controlled substances prescribed by him.

e. Respondent had continued to practice although unfit due to failure to keep abreast of current theory or practice in violation of Indiana Code §25-1-9-4(a)(4)(B), as

evidenced by Respondent's prescribing the controlled substance Vicodin to Special Agent 2 (SA 2) without legitimate medical purposes.

f. Respondent had continued to practice although unfit due to failure to keep abreast of current theory or practice in violation of Indiana Code §25-1-9-4(a)(4)(B), as evidenced by Respondent's prescribing the controlled substances Percocet and Xanax to DEA Task Force Agent 3 (TFO 3) without legitimate medical purposes and Respondent's prescribing the controlled substances Percocet, Xanax, and Restoril, without legitimate medical purposes and with knowledge that her urine drug screen was negative for the controlled substances prescribed by him.

g. Respondent had continued to practice although ~~unfit due to failure to keep abreast of current theory or~~ practice in violation of Indiana Code §25-1-9-4(a)(4)(B), as evidenced by Respondent's pre-signing of controlled substance prescriptions at his Greensburg office and leaving them for his office manager to fill out, in violation of 844 IAC 4-6-10(2) "The willful performance of an act likely to deceive or harm the public shall include, but not be limited to, the following acts: (2) pre-signing prescriptions.

h. Respondent had continued to practice although unfit due to failure to keep abreast of current theory or practice in violation of Indiana Code §25-1-9-4(a)(4)(B), as evidenced by Respondent's prescribing of controlled substances to individuals, including TFO 1, SA 2, and TFO 3 without proper safeguards to insure that these controlled substances were being used as prescribed, in violation of 844 IAC 4-6-10(4) "The willful performance of an act likely to deceive or harm the public shall include, but not be

limited to, the following acts: (4) negligence in the practice of medicine."

i. Respondent had engaged in lewd or immoral conduct in connection with the delivery of services in violation of Indiana Code §25-1-9-4(a)(5), as evidenced by the Respondent's participation in a murder for hire plot against a former patient and the fact that Respondent participated in meetings regarding the murder for hire plot in on October 26, 2006 in his Indianapolis office and on November 8, 2006 in his Greensburg office.

CONCLUSION OF LAW

1. The above disciplinary action take by the sister State of Indiana provides grounds to take disciplinary action against Respondent's license to practice medicine and surgery in New Jersey pursuant to N.J.S.A. 45:1-21(g), in that Respondent has had his authority to engage in the activity regulated by the Board revoked by another state for reasons consistent with N.J.S.A. 45:1-21.

DISCUSSION

Based on the foregoing findings and conclusions, a Provisional Order of Discipline was entered by this Board on November 14, 2008 suspending the Respondent's license to practice medicine in the State of New Jersey until such time as his Indiana license is actively reinstated with no restrictions or conditions.

* On November 14, 2008 the Provisional Order of Discipline was mailed to Respondent at his address of record at 973 Bayside Drive, Greenwood, Indiana via regular and certified mail. Both regular and certified mail were returned marked "Return to Sender - Unable to Forward."

- * On November 14, 2008 the Provisional Order of Discipline was mailed to Respondent at 3853 North Marleon Drive, Apt. 423, Muncie Indiana via regular and certified mail. The regular mail was not returned, the certified mail was returned marked "unclaimed."
- * On November 14, 2008 the Provisional Order of Discipline was mailed to Respondent at 8051 South Emerson Avenue, Apt. 370, Indianapolis, Indiana by both certified and regular mail. Both regular and certified mail were returned marked "Unable to Forward."
- * On November 14, 2008 the Provisional Order of Discipline was mailed to Respondent at 905 West Keegan Way, Greensburg, Indiana by both regular and certified mail. Both regular and certified mail were returned marked "forwarding time expired - unable to forward" with a new forwarding address of 1210 W. Main Street, Greensburg, Indiana.
- * On December 18, 2008 a fifth copy of the Provisional Order of Discipline was mailed to Respondent at 1210 West Main Street, Greensburg, Indiana by both regular and certified mail. The regular mail was returned marked "forwarding time expired - return to sender," and the certified mail was returned marked "unclaimed - final notice."

The Provisional Order of Discipline clearly stated that it was subject to finalization by the Board at 5:00 p.m. on the 30th business day following entry unless Respondent requested a modification or dismissal of the stated Findings of Fact or Conclusions of Law by submitting a written

request for modification or dismissal setting forth in writing any and all reasons why said findings and conclusions should be modified or dismissed and submitting any and all documents or other written evidence supporting Respondent's request for consideration and reasons therefor.

To date, Respondent has failed to submit a response to the Provisional Order of Discipline. Because the Board forwarded copies of the Provisional Order to Respondent's address of record and four other addresses associated with Respondent, the Board deems service to have been effected. Accordingly, it is determined that further proceedings are not necessary and that the Provisional Order should be made final.

ACCORDINGLY, IT IS on this 18th day of March, 2009

ORDERED THAT:

1. Respondent's license #MA49407 to practice medicine and surgery in the State of New Jersey shall be and hereby is suspended until his Indiana license is actively reinstated with no restrictions or conditions.

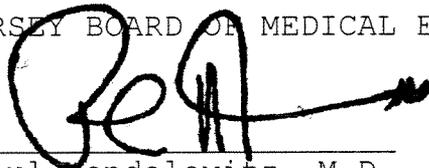
2. Respondent shall refrain from engaging in practice of medicine and surgery and shall not represent himself as a physician or surgeon until such time as his license is reinstated. Any practice in this State prior to such reinstatement shall constitute grounds for a charge of unlicensed practice.

3. In the event that Respondent seeks reinstatement of his New Jersey medical license at any time in the future, this Order shall require Respondent to appear before the Board, or a Committee thereof, to demonstrate fitness to practice medicine and show proof that he holds an active unrestricted license to practice medicine in the

State of Indiana. After considering all available information the Board will determine whether to reinstate Respondent's license and may impose restrictions or conditions on Respondent's license at the time of reinstatement

NEW JERSEY BOARD OF MEDICAL EXAMINERS

By:



Paul Mendelowitz, M.D.
Board President



Exhibit

A

BEFORE THE MEDICAL LICENSING
BOARD OF INDIANA
CAUSE NO. 2007 MLB 025

IN THE MATTER OF THE)
LICENSE OF)
ELMER MANALO, M.D.)
)
LICENSE NO: 01040595A)



**FINDINGS OF FACT, ULTIMATE FINDINGS OF FACT, CONCLUSIONS OF
LAW AND ORDER**

The Medical Licensing Board of Indiana ("Board") held an administrative hearing on August 27 and August 28, 2008, in Conference Room C of the Indiana Government Center South, 302 West Washington Street, Indianapolis, Indiana, concerning an amended disciplinary complaint filed against Elmer Manalo, M.D. ("Respondent") on or about July 2, 2008.

The State of Indiana was represented by Deputy Attorney General Elizabeth E. Kiefner. Respondent appeared in person and was represented by Mary Ann Wunder.

The Board, after considering the evidence presented and taking official notice of its file in this matter, by a vote of 6-0-0 on Counts 1 through 8 and a vote of 5-1-0 on Count 9, issues the following Findings of Fact, Ultimate Findings of Fact, Conclusions of Law and Order:

FINDINGS OF FACT

1. Respondent's address on file with the Board is 3853 North Marleon Drive, Apt 423, Muncie, IN 47304 and he is a licensed physician holding Indiana license number 01062905A. Respondent is also licensed to practice medicine in New York.

2. Respondent's Indiana medical license has been on summary suspension by agreement of the parties since September 27, 2007.

3. On or about January 19, 2005, the Drug Enforcement Administration ("DEA") began an investigation of Respondent.

4. On or about June 22, 2005, Detective Gretchen Yordy ("Yordy") of the Indiana State Police conducted an undercover visit to Respondent's Greensburg office located at 905 Keegans Way, Greensburg, Indiana ("Greensburg Office"). Yordy presented with a claim of cramping in her calves. Respondent prescribed 90 Tylenol #3 tablets to Yordy. This meeting was monitored by personnel from DEA and the Indiana State Police ("ISP").

5. On or about July 9, 2005, Yordy conducted her second undercover visit to Respondent's Greensburg Office. Respondent began performing an ultrasound on Yordy's legs. Respondent then left the procedure room and saw his remaining patients so that he and Yordy were left alone in his office. During the course of the "procedure", Respondent massaged Yordy's legs and inappropriately touched her buttocks. Respondent also procured a date with Yordy for the following day. He also offered Yordy a job in his office and refused to take any money for the patient visit. Respondent prescribed 120 Percocet 10/325 tablets and 60 Valium 5mg tablets to Yordy. This meeting was monitored by personnel from DEA and ISP.

6. Yordy did not keep the date scheduled for July 10, 2005. After that time, Respondent attempted to call her at least a dozen times to procure another date.

7. On or about February 28, 2006, DEA Task Force Officer Number 1 ("TFO 1") conducted an undercover visit to Respondent's Indianapolis office located at 7855 South Emerson Avenue, Suite N, Indianapolis, Indiana ("Indianapolis Office"). TFO 1 presented with a claim of a twisted right ankle. Respondent wrote TFO 1 an order to get

an x-ray. TFO 1 returned later that day without the x-ray and Respondent prescribed her 90 Lortab 10/500 tablets. This meeting was monitored by personnel from DEA.

8. On or about October 10, 2006, Jason Tortorici ("Tortorici"), a Special Agent with the Bureau of Alcohol, Tobacco, and Firearms ("ATF"), interviewed a confidential informant ("CI"). The CI informed Tortorici that in late August or early September 2006 the Respondent approached him about killing a former patient of Respondent's. The CI, a convicted felon, was acquainted with the Respondent because he had previously purchased three (3) handguns from the Respondent.

9. On or about October 23, 2006, the CI made a phone call to Respondent, which was recorded by ATF. ATF recognized the voice on the line as being that of the Respondent. The CI told Respondent he had someone to take care of the former patient.

Respondent indicated he did not want to meet the individual and to take care of it.

10. On or about October 26, 2006, the CI met with Respondent at the Respondent's Indianapolis Office. The meeting was monitored by ATF personnel including Tortorici. The CI discussed killing the former patient and Respondent indicated that he was too worried and to forget it. Respondent later indicated the CI should take care of it and to let him know when it was over.

11. On or about October 31, 2006, Special Agent 2 ("SA 2") made an undercover visit to Respondent's office. SA 2 was initially seen by Respondent on October 17, 2006. On that date, SA 2 complained of headaches and Respondent prescribed Fiorcet, a non-controlled substance. At the October 31, 2006 visit, SA 2 requested Vicodin. Respondent wrote SA 2 a prescription for 90 Vicodin after a three minute office visit that consisted solely of taking SA 2's blood pressure and pulse. Both meetings were monitored by personnel from DEA.

12. On or about November 8, 2006, the CI met with Respondent at Respondent's Greensburg Office. The meeting was monitored by ATF personnel including Tortorici. Respondent indicated to the CI that he did not want the former patient killed because it would hurt his conscience. He instructed the CI to "cripple" the former patient and that he would pay the CI in one (1) month.

13. On or about November 14, 2006, SA 2 made a third visit to Respondent's Indianapolis Office. SA 2 told the Respondent that he needed more Vicodin. Respondent prescribed SA 2 120 Vicodin ES after an office visit lasting five (5) minutes, which again consisted solely of taking SA 2's blood pressure and pulse. This meeting was monitored by personnel from DEA.

14. On or about January 9, 2007, Task Force Officer 3 ("TFO 3") conducted an undercover visit to Respondent's Indianapolis office, now located at 11530 E. Washington Street, Indianapolis, Indiana. TFO 3 presented with lower right arm pain. Respondent diagnosed TFO 3 with a bulging cervical disc, prescribed 90 Percocet 10/325 and 60 Xanax to TFO 3 and wrote an order for an x-ray of her spine. This meeting was monitored by personnel from DEA.

15. On or about February 8, 2007, TFO 3 made a second visit to Respondent's Indianapolis office. Respondent prescribed 90 Percocet 10/325 and 60 Xanax to TFO 3 after only taking her blood pressure. This meeting was monitored by personnel from DEA.

16. On or about March 8, 2007, TFO 3 made a third visit to Respondent's Indianapolis office. Respondent prescribed 120 Percocet 10/325 and 90 Xanax after TFO 3 inquired about taking an extra pill a day. This meeting was monitored by personnel from DEA.

17. On or about March 29, 2007, Yordy conducted her third undercover visit to Respondent's Greensburg Office. Respondent again offered Yordy a job and indicated that her breasts were "smaller." Respondent conducted a cursory examination and prescribed Yordy 90 Percocet 10/325. This meeting was monitored by personnel from DEA and ISP.

18. On or about April 12, 2007, TFO 3 conducted a fourth visit to Respondent's Indianapolis office. TFO 3 was asked to provide a urine sample which she did. Respondent took TFO 3 blood pressure and met with her for less than ten (10) minutes. Respondent wrote TFO 3 prescriptions for 120 Enalapril 10mg, a non-controlled substance, 90 Percocet 10/325, and 60 Xanax 2mg. This meeting was monitored by personnel from DEA.

19. On or about May 22, 2007, TFO 3 conducted a fifth visit to Respondent's Indianapolis office. TFO 3 was asked to provide a urine sample which she did. When TFO 3 complained about the wait time to see Respondent, he indicated he would see her "off hours" and gave her his personal cell phone number. During the course of her office visit, Respondent received the results from TFO 3 previous urine drug screen which was negative for all of the drugs Respondent prescribed her. Despite this knowledge, Respondent prescribed TFO 3 60 Enalapril 10mg, 90 Percocet 10/325, 90 Xanax 2mg, and 30 Restoril. This meeting was monitored by personnel from DEA.

20. On or about May 29, 2007, Yordy conducted her fourth undercover visit to Respondent's Greensburg Office. Yordy indicated to Respondent that her legs no longer hurt. Despite this information, Respondent prescribed Yordy 120 Percocet 10/325 and 60 Valium 5mg. Yordy's appointment was scheduled for 5:45 p.m. She waited through the night and eventually saw Respondent at 5:15 a.m. on May 30, 2007. This meeting was

monitored by personnel from DEA and ISP. Yordy was never required to take a urine drug screen during any of her four (4) office visits.

21. On or about September 4, 2007, the DEA conducted a search of Respondent's Greensburg and Indianapolis offices and his home. DEA personnel served Respondent with an "Order To Show Cause" and an immediate suspension of his DEA Certificate of Registration No. BM1099337.

22. Respondent failed to file individual income taxes from 2004 to 2006. Respondent never filed business income taxes for his medical offices.

23. In the last several years, Respondent has been personally sued numerous times in Marion and Decatur counties due to his eviction from various medical offices and nonpayment for medical equipment. Respondent's home and bank accounts were seized as a result of several hundred thousand dollars of judgments against him.

24. From approximately 2005 to 2007, Respondent's practice for cash patients was to charge between \$200 and \$250 for the initial visit and \$100 for subsequent visits. Respondent's staff issued receipts for cash paying patients and reconciled the cash taken in with the patient receipts at the end of each business day. All of the cash was then given directly to the Respondent.

25. For approximately the last year of operation at his practice, Respondent paid his office employees in cash and failed to take taxes out of their payroll or issue 1099 forms to his employees.

26. For approximately the last year of operation at his practice, the Respondent's electric and phone services were shut off numerous times for non-payment. Respondent also used the phone signal from an adjacent office at his Indianapolis location without paying for it.

27. At Respondent's Greensburg office, Respondent pre-signed controlled substance prescriptions and left them for his office manager Teresa Ripperger to fill out.

28. The investigator in charge of the DEA investigation, Laurie Kaufmann, testified at the hearing that Respondent prescribed the following controlled substances during the course of her investigation:

A. In 2005:

1. Total controlled substance prescriptions - 5,334;
2. Total dosage units of controlled substances - 442,462; and
3. Total Oxycodone prescriptions - 343.

B. In 2006:

1. Total controlled substance prescriptions - 17,928;
2. Total dosage units of controlled substances - 1,592,629; and
3. Total Oxycodone prescriptions - 1,464.

C. From January 1, 2007 to April 24, 2007;

1. Total number of controlled substance prescriptions - 9,083;
2. Total dosage units of controlled substances - 839,583; and
3. Total number of Oxycodone prescriptions - 1,085.

29. Respondent's discovery deposition was taken on November 20, 2007 by the Office of the Attorney General. At that time, Respondent admitted that he has had sexual relations with at least three (3) patients in the last several years. He also admitted that it is possible that he has had sexual relations with additional patients within that time frame.

ULTIMATE FINDINGS OF FACT

Respondent's violation is cause for disciplinary sanctions which may be imposed singly or in combination such as censure, a letter of reprimand, probation, suspension, or revocation and a fine up to the amount of \$1,000 per violation as detailed at Ind. Code § 25-1-9-9.

CONCLUSIONS OF LAW

1. Respondent violated Indiana Code § 25-1-9-4(a)(5), in that, the Respondent has engaged in a course of lewd or immoral conduct in connection with the delivery of services to the public as evidenced by his inappropriate touching of Yordy in the office setting and his solicitation of Yordy for dates.

2. Respondent violated Indiana Code § 25-1-9-4(a)(11), in that, the Respondent has engaged in sexual contact with a patient under the practitioner's care or has used the practitioner-patient relationship to solicit sexual contact with a patient under practitioner's care as evidenced by the Respondent's own admission that he had sexual relations with at least three (3) patients in the last several years.

3. Respondent violated Indiana Code § 25-1-9-4(a)(4)(B), in that, the Respondent continued to practice although unfit due to failure to keep abreast of current theory or practice to wit: 21 C.F.R. § 1306.04(a) "A prescription for a controlled substance to be effective must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice" as evidenced by Respondent's prescribing Percocet, Valium, and Tylenol 3 to Yordy without legitimate medical purposes.

4. Respondent is in violation of Indiana Code § 25-1-9-4(a)(4)(B), in that, the Respondent continued to practice although unfit due to failure to keep abreast of

current theory or practice to wit: 21 C.F.R. § 1306.04(a) "A prescription for a controlled substance to be effective must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice" as evidenced by Respondent's prescribing Lortab to TFO 1 without any legitimate medical purpose and with the knowledge that her urine drug screen was negative for the controlled substances prescribed by him.

5. Respondent is in violation of Indiana Code § 25-1-9-4(a)(4)(B), in that, the Respondent continued to practice although unfit due to failure to keep abreast of current theory or practice to wit: 21 C.F.R. § 1306.04(a) "A prescription for a controlled substance to be effective must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice" as evidenced by Respondent's prescribing Vicodin to SA 2 without legitimate medical purpose.

6. Respondent is in violation of Indiana Code § 25-1-9-4(a)(4)(B), in that, the Respondent continued to practice although unfit due to failure to keep abreast of current theory or practice to wit: 21 C.F.R. § 1306.04(a) "A prescription for a controlled substance to be effective must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice" as evidenced by Respondent's prescribing Percocet, Xanax, and Restoril to TFO 3 without legitimate medical purpose.

7. Respondent is in violation of Indiana Code § 25-1-9-4(a)(4)(B), in that, the Respondent continued to practice although unfit due to failure to keep abreast of current theory or practice to wit: 844 IAC 4-6-10(2) "The willful performance of an act likely to deceive or harm the public shall include, but not be limited to, the following

acts: (2) pre-signing prescriptions” as evidenced by the Respondent’s pre-signing of controlled substance prescriptions at his Greensburg office.

8. Respondent is in violation of Indiana Code § 25-1-9-4(a)(4)(B), in that, the Respondent continued to practice although unfit due to failure to keep abreast of current theory or practice to wit: 844 IAC 4-6-10(4) “The willful performance of an act likely to deceive or harm the public shall include, but not be limited to, the following acts: (4) negligence in the practice of medicine” as evidenced by the Respondent’s prescribing of controlled substances to individuals, including TFO 1, SA 2, and TFO 3 without proper safeguards to insure that these controlled substances were being used as prescribed.

~~9. Respondent is in violation of Indiana Code § 25-1-9-4(a)(5), in that, the Respondent engaged in lewd or immoral conduct in connection with the delivery of services to the public as evidenced by the Respondent’s participation in a murder for hire plot against a former patient and the fact that Respondent participated in meetings regarding the murder for hire plot in his medical office.~~

ORDER

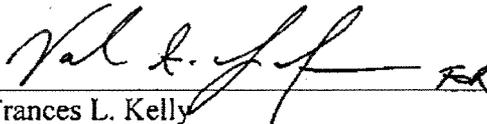
Based upon the above Findings of Fact, the Board issues the following Order:

The Respondent’s license to practice medicine in the state of Indiana is hereby

PERMANENTLY REVOKED.

So ORDERED, ADJUDGED, and DECREED, this 11TH day of September, 2008.

MEDICAL LICENSING BOARD OF INDIANA

By: 
Frances L. Kelly
Executive Director
Indiana Professional Licensing Agency

Copies to:

Elmer Manalo, MD
3853 North Marleon Drive
Apt 423
Muncie, IN 47304

SENT CERTIFIED MAIL NO. 7006 2760 0003 4668 6298
RETURN RECEIPT REQUESTED.

Mary Ann Wunder
Counsel for Respondent
5330 South Madison Avenue
Indianapolis, IN 46227

Deputy Attorney General Elizabeth E. Kiefner
Office of the Attorney General
302 West Washington Street, 5th Floor
Indianapolis, Indiana 46204-2770
(317) 234-2257

**DIRECTIVES APPLICABLE TO ANY MEDICAL BOARD LICENSEE
WHO IS DISCIPLINED OR WHOSE SURRENDER OF LICENSURE
HAS BEEN ACCEPTED**

APPROVED BY THE BOARD ON MAY 10, 2000

All licensees who are the subject of a disciplinary order of the Board are required to provide the information required on the Addendum to these Directives. The information provided will be maintained separately and will not be part of the public document filed with the Board. Failure to provide the information required may result in further disciplinary action for failing to cooperate with the Board, as required by N.J.A.C. 13:45C-1 et seq. Paragraphs 1 through 4 below shall apply when a license is suspended or revoked or permanently surrendered, with or without prejudice. Paragraph 5 applies to licensees who are the subject of an order which, while permitting continued practice, contains a probation or monitoring requirement.

1. Document Return and Agency Notification

The licensee shall promptly forward to the Board office at Post Office Box 183, 140 East Front Street, 2nd floor, Trenton, New Jersey 08625-0183, the original license, current biennial registration and, if applicable, the original CDS registration. In addition, if the licensee holds a Drug Enforcement Agency (DEA) registration, he or she shall promptly advise the DEA of the licensure action. (With respect to suspensions of a finite term, at the conclusion of the term, the licensee may contact the Board office for the return of the documents previously surrendered to the Board. In addition, at the conclusion of the term, the licensee should contact the DEA to advise of the resumption of practice and to ascertain the impact of that change upon his/her DEA registration.)

2. Practice Cessation

The licensee shall cease and desist from engaging in the practice of medicine in this State. This prohibition not only bars a licensee from rendering professional services, but also from providing an opinion as to professional practice or its application, or representing him/herself as being eligible to practice. (Although the licensee need not affirmatively advise patients or others of the revocation, suspension or surrender, the licensee must truthfully disclose his/her licensure status in response to inquiry.) The disciplined licensee is also prohibited from occupying, sharing or using office space in which another licensee provides health care services. The disciplined licensee may contract for, accept payment from another licensee for or rent at fair market value office premises and/or equipment. In no case may the disciplined licensee authorize, allow or condone the use of his/her provider number by any health care practice or any other licensee or health care provider. (In situations where the licensee has been suspended for less than one year, the licensee may accept payment from another professional who is using his/her office during the period that the licensee is suspended, for the payment of salaries for office staff employed at the time of the Board action.)

A licensee whose license has been revoked, suspended for one (1) year or more or permanently surrendered must remove signs and take affirmative action to stop advertisements by which his/her eligibility to practice is represented. The licensee must also take steps to remove his/her name from professional listings, telephone directories, professional stationery, or billings. If the licensee's name is utilized in a group practice title, it shall be deleted. Prescription pads bearing the licensee's name shall be destroyed. A destruction report form obtained from the Office of Drug Control (973-504-6558) must be filed. If no other licensee is providing services at the location, all medications must be removed and returned to the manufacturer, if possible, destroyed or safeguarded. (In situations where a license has been suspended for less than one year, prescription pads and medications need not be destroyed but must be secured in a locked place for safekeeping.)

3. Practice Income Prohibitions/Divestiture of Equity Interest in Professional Service Corporations and Limited Liability Companies

A licensee shall not charge, receive or share in any fee for professional services rendered by him/herself or others while barred from engaging in the professional practice. The licensee may be compensated for the reasonable value of services lawfully rendered and disbursements incurred on a patient's behalf prior to the effective date of the Board action.

A licensee who is a shareholder in a professional service corporation organized to engage in the professional practice, whose license is revoked, surrendered or suspended for a term of one (1) year or more shall be deemed to be disqualified from the practice within the meaning of the Professional Service Corporation Act. (N.J.S.A. 14A:17-11). A disqualified licensee shall divest him/herself of all financial interest in the professional service corporation pursuant to N.J.S.A. 14A:17-13(c). A licensee who is a member of a limited liability company organized pursuant to N.J.S.A. 42:1-44, shall divest him/herself of all financial interest. Such divestiture shall occur within 90 days following the the entry of the Order rendering the licensee disqualified to participate in the applicable form of ownership. Upon divestiture, a licensee shall forward to the Board a copy of documentation forwarded to the Secretary of State, Commercial Reporting Division, demonstrating that the interest has been terminated. If the licensee is the sole shareholder in a professional service corporation, the corporation must be dissolved within 90 days of the licensee's disqualification.

4. Medical Records

If, as a result of the Board's action, a practice is closed or transferred to another location, the licensee shall ensure that during the three (3) month period following the effective date of the disciplinary order, a message will be delivered to patients calling the former office premises, advising where records may be obtained. The message should inform patients of the names and telephone numbers of the licensee (or his/her attorney) assuming custody of the records. The same information shall also be disseminated by means of a notice to be published at least once per month for three (3) months in a newspaper of

general circulation in the geographic vicinity in which the practice was conducted. At the end of the three month period, the licensee shall file with the Board the name and telephone number of the contact person who will have access to medical records of former patients. Any change in that individual or his/her telephone number shall be promptly reported to the Board. When a patient or his/her representative requests a copy of his/her medical record or asks that record be forwarded to another health care provider, the licensee shall promptly provide the record without charge to the patient.

5. Probation/Monitoring Conditions

With respect to any licensee who is the subject of any Order imposing a probation or monitoring requirement or a stay of an active suspension, in whole or in part, which is conditioned upon compliance with a probation or monitoring requirement, the licensee shall fully cooperate with the Board and its designated representatives, including the Enforcement Bureau of the Division of Consumer Affairs, in ongoing monitoring of the licensee's status and practice. Such monitoring shall be at the expense of the disciplined practitioner.

(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 the Board Order and accepted standards of practice.

(b) Monitoring of status conditions for an impaired practitioner may include, but is not limited to, practitioner cooperation in providing releases permitting unrestricted access to records and other information to the extent permitted by law from any treatment facility, other 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 practitioners. If bodily substance monitoring has been ordered, the practitioner shall fully cooperate by responding to a demand for breath, blood, urine or other sample in a timely manner and providing the designated sample.

**NOTICE OF REPORTING PRACTICES OF BOARD
REGARDING DISCIPLINARY ACTIONS**

Pursuant to N.J.S.A. 52:14B-3(3), all orders of the New Jersey State Board of Medical Examiners are available for public inspection. Should any inquiry be made concerning the status of a licensee, the inquirer will be informed of the existence of the order and a copy will be provided if requested. All evidentiary hearings, proceedings on motions or other applications which are conducted as public hearings and the record, including the transcript and documents marked in evidence, are available for public inspection, upon request.

Pursuant to 45 CFR Subtitle A 60.8, the Board is obligated to report to the National Practitioners Data Bank any action relating to a physician which is based on reasons relating to professional competence or professional conduct:

- (1) Which revokes or suspends (or otherwise restricts) a license,
- (2) Which censures, reprimands or places on probation,
- (3) Under which a license is surrendered.

Pursuant to 45 CFR Section 61.7, the Board is obligated to report to the Healthcare Integrity and Protection (HIP) Data Bank, any formal or official actions, such as revocation or suspension of a license (and the length of any such suspension), reprimand, censure or probation or any other loss of license or the right to apply for, or renew, a license of the provider, supplier, or practitioner, whether by ~~operation of law, voluntary surrender, non-renewability, or otherwise, or any other negative action or~~ finding by such Federal or State agency that is publicly available information.

Pursuant to N.J.S.A. 45:9-19.13, if the Board refuses to issue, suspends, revokes or otherwise places conditions on a license or permit, it is obligated to notify each licensed health care facility and health maintenance organization with which a licensee is affiliated and every other board licensee in this state with whom he or she is directly associated in private medical practice.

In accordance with an agreement with the Federation of State Medical Boards of the United States, a list of all disciplinary orders are provided to that organization on a monthly basis.

Within the month following entry of an order, a summary of the order will appear on the public agenda for the next monthly Board meeting and is forwarded to those members of the public requesting a copy. In addition, the same summary will appear in the minutes of that Board meeting, which are also made available to those requesting a copy.

Within the month following entry of an order, a summary of the order will appear in a Monthly Disciplinary Action Listing which is made available to those members of the public requesting a copy.

On a periodic basis the Board disseminates to its licensees a newsletter which includes a brief description of all of the orders entered by the Board.

From time to time, the Press Office of the Division of Consumer Affairs may issue releases including the summaries of the content of public orders.

Nothing herein is intended in any way to limit the Board, the Division or the Attorney General from disclosing any public document.