

PAULA T. DOW
ACTING ATTORNEY GENERAL OF NEW JERSEY
Division of Law
124 Halsey Street
P.O. Box 45029
Newark, New Jersey 07101

By: Siobhan B. Krier
Deputy Attorney General
Tel. (973) 648-2478

FILED

APRIL 26, 2010

**NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS**

E F F E C T I V E

Nunc Pro Tunc FEBRUARY 16, 2010
**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
OAL DOCKET NO.: BDSME 06963-2008S

IN THE MATTER OF THE SUSPENSION
OR REVOCATION OF THE LICENSE OF

JOSEPH ZAWID, M.D.
LICENSE NO.: MA26117

TO PRACTICE MEDICINE AND SURGERY
IN THE STATE OF NEW JERSEY

Administrative Action

CONSENT ORDER

This matter opened to the State Board of Medical Examiners ("Board") upon the filing of an Administrative Complaint on July 21, 2008. The Complaint alleges that on January 24, 2006, Dr. Zawid performed an inappropriate breast examination on N.S.¹, a twenty-one year-old female patient with an inappropriate chaperone, contrary to a Private Letter Agreement ("PLA") Dr. Zawid entered into previously regarding breast examinations. The Complaint alleges that Dr. Zawid's conduct violated N.J.S.A. 45:1-21(b), - (e), and - (h); N.J.S.A. 45:9-6; and N.J.A.C. 13:35-6.3. Dr. Zawid

¹Initials are used to preserve patient confidentiality; the patient's full identity has been made known to the doctor.

CERTIFIED TRUE COPY

filed an Answer was filed by Respondent denying the allegations on August 19, 2009.

In 1994, following a patient complaint, Dr. Zawid entered into a PLA with the Board whereby he agreed to explain and obtain consent prior to conducting breast examinations and to have a chaperone present while examining female patients.

Dr. Zawid appeared before a Committee of the Board on December 27, 2006, to discuss the allegations against him. The Board also heard from the patient, N.S. and from S.H., a witness to the examination.

The matter transferred to the Office of Administrative Law where it was scheduled to be heard by the Honorable Ana C. Viscomi, ALJ.

The Board finds that the examination conducted on N.S. was conducted inappropriately. The Board also finds that it was inappropriate to have two other males, a medical student and the patient's fiancé, present in the examination room during the examination and that Dr. Zawid failed to use an appropriate chaperone. Accordingly, the Board finds that Respondent engaged in professional misconduct, in violation of N.J.S.A. 45:1-21(e); sexual harassment, in violation of N.J.A.C. 13:35-6.3 and thus, a failure to comply with the provisions of the acts and regulations administered by the Board, in violation of N.J.S.A. 45:1-21(h).

Respondent, wanting to resolve this matter without formal proceedings, neither admits nor denies the allegations, and the

Board finding the within disposition to be adequately protective of the public health, safety and welfare and it appearing that good cause exists for the entry of the within Order, Dr. Zawid and the Board have agreed to the form and entry of the within Order.

IT IS, therefore, on this 16TH day of FEBRUARY 2010;
ORDERED and AGREED that:

1. Respondent, Joseph Zawid, M.D.'s license to practice medicine and surgery in the State of New Jersey shall be suspended for a period of two years, which time shall be stayed and served as a period of probation.

2. Respondent shall retain, at his own expense, a professionally licensed person to function as a chaperone whenever the doctor is treating female patients.

a) The chaperone shall be a person approved in advance by the Board, and shall be subject to on-going approval by the Board.

b) The chaperone will be furnished with a copy of this Order and will, in writing, agree to abide by its terms.

c) If the chaperone fails to comply with any of the terms of the Order, the Board reserves the right to rescind its approval and the doctor shall immediately retain another chaperone, also subject to Board approval.

d) The chaperone shall be in the doctor's company at all times during the examination and treatment of female patients, in all practice settings, and shall so indicate by initialing all

relevant patient charts.

e) The chaperone shall immediately notify the Medical Director of the Board and the Attorney General in the event that she becomes aware of any inappropriate conduct with female patients by the doctor, if she is aware or reasonably should be aware that the doctor is not in full compliance with any portion of this Order, or in the event that she has reason to believe that the doctor's conduct may pose any threat of harm to others.

f) The chaperone shall agree to timely provide routine quarterly reports to the Medical Director confirming respondent's cooperation with the chaperone requirements.

3. Respondent shall refrain from conducting any breast examinations or pelvic examinations on female patients under any circumstances. Patients in need of a breast or pelvic examination shall be referred to an appropriate specialist.

4. Respondent shall post a sign in the waiting room that can be seen by patients, advising them that a female, Board approved, licensee of a healthcare Board will be present during examinations of all female patients.

5. Respondent shall be liable for a civil penalty in the amount of \$5,000. The sum shall be payable within ten (10) business days of the entry of this Order and shall be delivered to and made payable to the State Board of Medical Examiners, P.O. Box 183, Trenton, New Jersey 08625-0183.

6. Respondent shall be liable for the payment of costs,

including investigative costs in the amount of \$3,532.91 and transcript costs in the amount of \$828.00, for a total of \$4,360.91. Respondent shall deliver payment in the total amount of \$4,360.91 to the attention of the Executive Director, in a certified check or money order made payable to the Board of Medical Examiners, within thirty days of entry of this Order. Said debt shall be memorialized in a Certificate of Debt duly recorded in the State of New Jersey. Certificate of Debt.

7. Respondent shall cease and desist from permitting medical students to act as observers or provide medical care in his office.

NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

By: _____

Paul Mendelowitz, M.D.
Board President

I have read and understood
the Order. I agree to be
bound by its contents.

Joseph Zawid, M.D.

I consent to the form and
entry of the within Order.

Michael J. Keating, Esquire
Attorney for Respondent

**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.