

prescriptions to patients' pharmacies using another doctor's name and DEA registration, albeit that doctor is not licensed in the State of New Jersey and was not on the premises. These violations ran contrary to the terms of the Consent Order Granting Restricted License filed February 25, 2011 that required that Respondent practice in a setting pre-approved by the Board and that he notify the Board in writing of his practice location.

Respondent entered into an Interim Consent Order of Temporary Suspension filed June 25, 2012 by the Board. Respondent surrendered his license and immediately ceased and desisted from the practice of medicine and surgery in the State of New Jersey.

On January 23, 2013, Respondent appeared before a preliminary evaluation committee of the Board to discuss the circumstances that lead to the Interim Consent Order, his ongoing sobriety and his petition to return to practice. The Board found that Respondent was truthful and contrite.

Respondent and the Board entered into a Final Consent Order filed April 24, 2013 that provides that Respondent's license to practice medicine and surgery in New Jersey is suspended for a minimum of one year from June 25, 2012, and that the suspension shall continue until further Order of the Board following an appearance by Respondent before a Committee of the Board after June 25, 2013. He was not to request such an appearance unless and until he could verify ninety (90) days of sobriety through ongoing

treatment with the Professional Assistance Program ("PAP").

Respondent appeared before a Committee of the Board on October 23, 2013. He was accompanied by Dr. Louis Baxter Sr., Executive Medical Director of the PAP, who verified Respondent's sobriety through ongoing treatment.

The Board and Respondent have agreed to the entry of this Consent Order to resolve this matter. The Board has considered the matter and finds that the entry of this Order will adequately protect the public's health, safety and welfare, and for good cause shown

. IT IS ON THIS 1 DAY OF May 2014;

HEREBY ORDERED AS FOLLOWS:

1. Respondent's license to practice medicine and surgery in New Jersey shall be reinstated with restrictions, subject to the terms and conditions of this Consent Order.
2. For the duration of his license, Respondent shall practice medicine and surgery solely in a group practice, hospital or institutional setting preapproved by the Board.
3. For the duration of his license, Respondent shall notify the Board in writing of the name, address and telephone number of each entity or practice where he practices medicine and surgery prior to beginning such practice, including any change in employment or periods when he is working in a field other than medicine.

4. Respondent shall register with the Physician's Monitoring Program for so long as he retains his medical license in the State of New Jersey.
5. Respondent shall remain in the Professional Assistance Program for so long as he maintains his medical license in the State of New Jersey. If the Professional Assistance Program recommends termination of his participation in the Program, Respondent may petition the Board to terminate this requirement.
6. Respondent shall maintain absolute abstinence from all psychoactive substances, including alcohol, unless prescribed by a treating physician for a documented medical condition with immediate written notification to the Medical Director of the Professional Assistance Program. Respondent's associates or family members shall not be considered treating physicians for the purpose of prescribing psychoactive drugs.
7. Respondent shall submit to random twice weekly urine monitoring for the first six (6) months following return to the practice of medicine and surgery. After six (6) months, urine monitoring shall be random and at a frequency determined by the Director of the Professional Assistance Program.
8. Respondent shall participate in monthly face-to-face visits with a representative of the Professional Assistance Program for the first three (3) months following his return to

practice, followed by meetings every two (2) months for the remainder of the first year of his return to practice. Thereafter, meetings shall be at a frequency determined by the Director of the Professional Assistance Program.

9. The Professional Assistance Program shall provide the Board with quarterly status reports regarding Respondent's participation in his recovery program, with immediate notification (within forty eight (48) hours of awareness of occurrence) of evidence of any relapse or noncompliance with any of the terms of the within Consent Order.
10. Respondent shall be followed by his neurologist regarding treatment of his Parkinson disease who shall provide quarterly reports to the Professional Assistance Program. Dr. O'Connell shall make his best efforts to insure the timely delivery of these reports. Delay on the part of the neurologist shall not be deemed a deviation for purposes of paragraph 14 below.
11. The Board and the Attorney General will have full and complete access to any communications between Respondent and the Professional Assistance Program and between Respondent and his treating physicians, and will have full and complete access to any reports, recommendations or evaluations issued by these entities, including but not limited to the release of the medical reports and evaluations. Respondent hereby authorizes the Professional Assistance Program and his treating

physicians to provide copies of any recommendations, evaluations, or reports to the Board and to the Attorney General simultaneously with their provision to Respondent. In addition, the Board, its agents and employees, including but not limited to the Medical Director of the Board, may communicate directly with these individuals from time to time with regard to Respondent's evaluation or participation.

12. Respondent specifically acknowledges that any recommendations, evaluations, or reports issued by the Professional Assistance Program or his treating physicians may be introduced during the course of any future disciplinary proceedings.
13. Due to the Board's concern regarding Respondent's Parkinson's disease, the following restrictions will apply only were Respondent to practice invasive cardiology:

- a. Respondent shall be supervised by a supervising physician preapproved by the Board, if he engages in invasive cardiology. The supervisor shall have full access to the Board's investigation including the October 23, 2013 Preliminary Evaluation Committee minutes, and shall have reviewed each of the prior Consent Orders as well as the within Consent Order. The supervisor shall have the authority to require appropriate professional behavior of Respondent and shall determine whether Respondent's

practice of invasive cardiology should be subject to any limitations, and shall require those limitations be in place, in addition to those provided in his Consent Order. The supervising physician shall sign a copy of the within Consent Order confirming with the Board in that he or she has read and understands this Consent Order, agrees to supervise Respondent's practice of invasive cardiology and submit quarterly and immediate reports directly to the Board. A copy of the Consent Order signed by the supervisor shall be sent to the Board no later than ten (10) days prior to Respondent engaging in invasive cardiology.

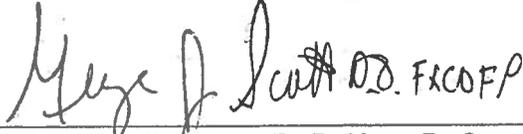
- b. If a supervising physician is approved by the Board and Respondent engages in invasive cardiology, the initial report of the supervising physician shall include an evaluation of Respondent's invasive cardiology skills. The report shall describe the evaluation plan, the number and type of invasive procedures that the supervising physician personally observed Respondent perform, the supervising physician's opinion of Respondent's current level of skills and dexterity, whether Respondent's practice of invasive cardiology should be subject to any limitations and how any limitations of practice have

been implemented as well as comment on Respondent's progress in engaging in invasive cardiology. The initial report shall be submitted no later than ninety (90) days after Respondent begins engaging in invasive cardiology. The supervising physician shall continue to submit quarterly reports directly to the Board describing the number and type of invasive cardiology procedures Respondent has performed each quarter and describe Respondent's level of competence, skill, dexterity and ability to perform invasive cardiology procedures.

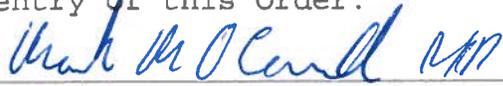
- c. The supervising physician shall immediately (within forty-eight (48) hours of occurrence) report to the Board orally and in writing any actions by Respondent in violation of the Consent Order, any practice beyond the limitations set by the supervisor, any incidents in which the supervisor deems Respondent's ability to perform the procedure is in question, or any failure of Respondent to cooperate with the supervising physician.
- d. Respondent consents to his supervising physician and the Board providing each other with information concerning his professional behavior and progress.

- e. Respondent shall ensure that if he engages in invasive cardiology the Board will receive a copy of this Consent Order signed by his supervising physician and quarterly reports. Respondent shall take all necessary actions to assure the cooperation of his supervising physician with the Board and the Attorney General.
14. Any deviation from the terms of this Order without the prior written consent of the Board shall constitute a failure to comply with the terms of this Order. Upon receipt of any reliable information indicating Respondent has violated any term of this Order, including but not limited to a confirmed positive urine, a relapse into the use of alcohol or psychoactive substance without the approval of a treating physician for medical indication, Respondent's license shall be automatically suspended by the Board, said suspension shall be deemed a permanent suspension (i.e. revocation) of Respondent's medical license, with prejudice to any reapplication.
15. Respondent shall have the right to apply for removal of the automatic suspension upon written application to the Executive Director of the Board or his designee. Respondent shall be granted an opportunity to present evidence limited to a showing that the information the Board relied upon was false.

NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

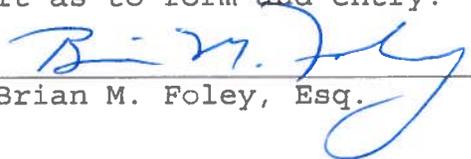
By: 
George J. Scott, D.P.M., D.O.
President

I have read and understand
the above Order and I agree
to be bound by its terms.
I hereby consent to the
entry of this Order.


Mark M. O'Connell, M.D.

Dated: April 20, 2014

I have read the within
Consent Order and consent to
it as to form and entry.


Brian M. Foley, Esq.

Dated: April 22, 2014