

MEDICAL BOARD

JAN 15 2009

**STATE OF OHIO
THE STATE MEDICAL BOARD
VOLUNTARY RETIREMENT FROM THE
PRACTICE OF MEDICINE AND SURGERY**

I, Simon G. Kovalik, M.D., am aware of my rights to representation by counsel, the right of being formally charged and having a formal adjudicative hearing, and do hereby freely execute this document and choose to take the actions described herein.

I, Simon G. Kovalik, M.D., do hereby voluntarily, knowingly, and intelligently retire from the practice of medicine and surgery, effective upon the last date of signature below.

I, Simon G. Kovalik, M.D., do hereby voluntarily, knowingly and intelligently surrender my renewal card in connection with my certificate to practice medicine and surgery, License No. 35.046207, to the State Medical Board of Ohio [Board].

I understand that as a result of the surrender herein I am no longer permitted to practice medicine and surgery in any form or manner in the State of Ohio.

I agree that I shall be ineligible for, and shall not apply for, reinstatement or restoration of certificate to practice medicine and surgery, License No. 35.046207, or issuance of any other certificate pursuant to the authority of the State Medical Board of Ohio, on or after the date of signing this Voluntary Retirement from the Practice of Medicine and Surgery. Any such attempted reapplication shall be considered null and void and shall not be processed by the Board.

I, Simon G. Kovalik, M.D., hereby release the State Medical Board of Ohio, its members, employees, agents and officers, jointly and severally, from any and all liability arising from the within matter.

This document shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. Further, this information may be reported to appropriate organizations, data banks and governmental bodies. I, Simon G. Kovalik, M.D., acknowledge that my social security number will be used if this information is so reported and agree to provide my social security number to the Board for such purposes.

Voluntary Retirement
Simon G. Kovalik, M.D.

I stipulate and agree that I am taking the action described herein in lieu of further investigation of a possible violation of Section 4731.22(B)(19), Ohio Revised Code, related to a physical condition which has rendered me incapable of practicing medicine and surgery.

EFFECTIVE DATE

It is expressly understood that this Voluntary Retirement is subject to ratification by the Board prior to signature by the Secretary and Supervising Member and shall become effective upon the last date of signature below.

Simon G. Kovalik MD.
SIMON G. KOVALIK, M.D.

JAN. 22, 2010
DATE

Lance A. Talmage, MD/BAJ
LANCE A. TALMAGE, M.D. *by authorization*
Secretary

March 10, 2010
DATE

Raymond J. Albert/BAJ
RAYMOND J. ALBERT *by authorization*
Supervising Member

March 10, 2010
DATE


DANIEL S. ZINSMASER, ESQ.
Enforcement Attorney

1/26/2010
DATE

MEDICAL BOARD

JAN 28 2010

**CONSENT AGREEMENT
BETWEEN
SIMON G. KOVALIK, M.D.
AND
THE STATE MEDICAL BOARD OF OHIO**

This Consent Agreement is entered into by and between Simon G. Kovalik M.D., [Dr. Kovalik], and the State Medical Board of Ohio [Board], a state agency charged with enforcing Chapter 4731., Ohio Revised Code.

Dr. Kovalik enters into this Consent Agreement being fully informed of his rights under Chapter 119., Ohio Revised Code, including the right to representation by counsel and the right to a formal adjudicative hearing on the issues considered herein.

BASIS FOR ACTION

This Consent Agreement is entered into on the basis of the following stipulations, admissions and understandings:

- A. The Board is empowered by Section 4731.22, Ohio Revised Code, to limit, revoke, suspend a certificate, refuse to register or reinstate an applicant, or reprimand or place on probation the holder of a certificate for violation of Section 4731.22(B)(18), Ohio Revised Code, "violation of any provision of a code of ethics of the American medical association, the American osteopathic association, the American podiatric medical association, or any other national professional organizations that the board specifies by rule."
- B. The Board enters into this Consent Agreement in lieu of formal proceedings based upon the violation of Section 4731.22(B)(18), Ohio Revised Code, to wit: Principle II of the American Medical Association's Principles of Medical Ethics. "[a] physician shall uphold the standards of professionalism, be honest in all professional interactions, and strive to report physicians deficient in character or competence, or engaging in fraud or deception, to appropriate entities," as set forth in Paragraph E below. The Board expressly reserves the right to institute formal proceedings based upon any other violations of Chapter 4731. of the Ohio Revised Code, whether occurring before or after the effective date of this Consent Agreement.
- C. Dr. Kovalik is licensed to practice medicine and surgery in the State of Ohio, License # 35-046207.
- D. Dr. Kovalik states that he is also licensed to practice medicine and surgery in the State of Michigan, License #4301039466.

- E. Dr. Kovalik admits that he maintained a private solo practice in peripheral vascular and trauma surgery in Toledo, Ohio, from in or about 1982 through 2003. Dr. Kovalik further admits that he currently practices vascular and general surgery at the Veterans Administration Black Health Care System located in Ft. Meade, South Dakota. Dr. Kovalik further admits that on or about February 22, 2005, he self-reported to the Board that during the time he resided and practiced medicine in Toledo, Ohio, he had engaged in an intimate relationship with a female from in or about 1994 through in or about 2003. Dr. Kovalik further admits that approximately six years after commencement of such relationship, he provided sclerotherapy treatment to said female. Dr. Kovalik specifically denies ever providing or prescribing any controlled substances to said female at any time.

Dr. Kovalik further admits that the aforementioned conduct constitutes a violation of Section 4731.22(B)(18), Ohio Revised Code, to wit: Principle II of the American Medical Association's Principles of Medical Ethics, which provides in pertinent part, that a physician shall uphold the standards of professionalism.

AGREED CONDITIONS

Wherefore, in consideration of the foregoing and mutual promises hereinafter set forth, and in lieu of any formal proceedings at this time, Dr. Kovalik knowingly and voluntarily agrees with the Board to the following terms, conditions and limitations:

Simon G. Kovalik, M.D., is hereby REPRIMANDED.

Further, Dr. Kovalik knowingly and voluntarily agrees with the Board to the following PROBATIONARY terms, conditions and limitations:

1. Dr. Kovalik shall obey all federal, state, and local laws, and all rules governing the practice of medicine in Ohio.

Professional Ethics Course

2. Before the end of the first year of probation, or as otherwise approved by the Board, Dr. Kovalik shall provide acceptable documentation of successful completion of a course or courses dealing with professional ethics. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any courses taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Kovalik submits the documentation of successful completion of the course or courses dealing with professional ethics, he shall also

submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.

Required Reporting by Licensee

3. Within thirty days of the effective date of this Consent Agreement, Dr. Kovalik shall provide a copy of this Consent Agreement to all employers or entities with which he is under contract to provide health care services or is receiving training; and the Chief of Staff at each hospital where he has privileges or appointments. Further, Dr. Kovalik shall provide a copy of this Consent Agreement to all employers or entities with which he contracts to provide health care services, or applies for or receives training, and the Chief of Staff at each hospital where he applies for or obtains privileges or appointments. This requirement shall continue for two years following the effective date of this "Consent Agreement."
4. Within thirty days of the effective date of this Consent Agreement, Dr. Kovalik shall provide a copy of this Consent Agreement by certified mail, return receipt requested, to the proper licensing authority of any state or jurisdiction in which he currently holds any professional license. Dr. Kovalik further agrees to provide a copy of this Consent Agreement by certified mail, return receipt requested, at time of application to the proper licensing authority of any state in which he applies for any professional license or for reinstatement of any professional license. Further, Dr. Kovalik shall provide this Board with a copy of the return receipt as proof of notification within thirty days of receiving that return receipt. This requirement shall continue for two years following the effective date of this "Consent Agreement."

FAILURE TO COMPLY

If, in the discretion of the Secretary and Supervising Member of the Board, Dr. Kovalik appears to have violated or breached any term or condition of this Consent Agreement, the Board reserves the right to institute formal disciplinary proceedings for any and all possible violations or breaches, including, but not limited to, alleged violations of the laws of Ohio occurring before the effective date of this Consent Agreement.

DURATION

Dr. Kovalik shall not request termination of the probationary terms, limitations and conditions contained in this Consent Agreement for a minimum of two years. In addition, Dr. Kovalik shall not request modification to the probationary terms, limitations and conditions contained herein for at least one year. Otherwise, the above-described terms, limitations and conditions may be amended or terminated in writing at any time upon the agreement of both parties.

ACKNOWLEDGMENTS/LIABILITY RELEASE

Dr. Kovalik acknowledges that he has had an opportunity to ask questions concerning the terms of this Consent Agreement and that all questions asked have been answered in a satisfactory manner.

Any action initiated by the Board based on alleged violations of this Consent Agreement shall comply with the Administrative Procedure Act, Chapter 119., Ohio Revised Code.

Dr. Kovalik hereby releases the Board, its members, employees, agents, officers and representatives jointly and severally from any and all liability arising from the within matter.

This Consent Agreement shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. Further, this information may be reported to appropriate organizations, data banks and governmental bodies. Dr. Kovalik acknowledges that his social security number will be used if this information is so reported and agrees to provide his social security number to the Board for such purposes.

EFFECTIVE DATE

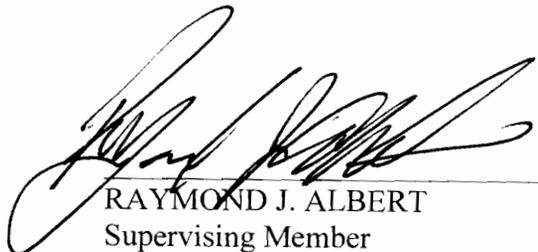
It is expressly understood that this Consent Agreement is subject to ratification by the Board prior to signature by the Secretary and Supervising Member and shall become effective upon the last date of signature below.


SIMON G. KOVALIK, M.D.

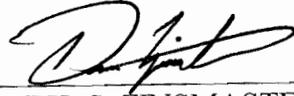

LANCE A. TALMAGE, M.D.
Secretary

December 30, 2006
DATE

1-10-07
DATE


RAYMOND J. ALBERT
Supervising Member

1/10/07
DATE



DANIEL S. ZINSMaster
Enforcement Attorney

1/5/07

DATE