

BEFORE THE STATE MEDICAL BOARD OF OHIO

IN THE MATTER OF

*

*

NORMAN W. LEFKOVITZ, M.D.

*

ENTRY OF ORDER

On October 31, 2014, Norman W. Lefkovitz, M.D., executed a Surrender of his license to practice medicine and surgery in Ohio with consent to permanent revocation, which document is attached hereto and fully incorporated herein.

Wherefore, upon ratification by the Board of the surrender, it is hereby ORDERED that Certificate No. 35-049231 authorizing Norman W. Lefkovitz, M.D. to practice medicine and surgery in the State of Ohio be permanently REVOKED.

This Order is hereby entered upon the Journal of the State Medical Board of Ohio for the 5th day of November 2014, and the original thereof shall be kept with said Journal.

Mark A. Bechtel, M.D., per telephone
Mark A. Bechtel, M.D. authority/KCA
Secretary 11/5/14

November 5, 2014

Date

(SEAL)

STATE OF OHIO
THE STATE MEDICAL BOARD
PERMANENT SURRENDER OF CERTIFICATE
TO PRACTICE MEDICINE AND SURGERY

MEDICAL BOARD

NOV 5 2014

Do not sign this agreement without reading it. An individual who permanently surrenders a certificate issued by the Board is forever thereafter ineligible to hold a certificate to practice or to apply to the Board for reinstatement of the certificate or issuance of any new certificate. You are permitted to be accompanied, represented and advised by an attorney, at your own expense, before deciding to sign this voluntary agreement.

I, Norman W. Lefkovitz, 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, Norman W. Lefkovitz, M.D., acknowledge that I am not currently legally authorized to practice medicine and surgery in the state of Ohio, due to the expiration of my certificate to practice medicine and surgery, License #35.049231, on or about July 1, 2014. Further, I, Norman W. Lefkovitz, M.D., do hereby voluntarily, knowingly, and intelligently surrender my certificate to practice medicine and surgery, License #35.049231, to the State Medical Board of Ohio [Board], thereby relinquishing all rights to practice medicine and surgery in Ohio.

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 #35.049231 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 Permanent Surrender of Certificate to Practice Medicine and Surgery. Any such attempted reapplication shall be considered null and void and shall not be processed by the Board.

I hereby authorize the State Medical Board of Ohio to enter upon its Journal an Order permanently revoking my certificate to practice medicine and surgery, License #35.049231, in conjunction with which I expressly waive the provision of Section 4731.22(B), Ohio Revised Code, requiring that six (6) Board Members vote to revoke said certificate, and further expressly and forever waive all rights as set forth in Chapter 119., Ohio Revised Code, including but not limited to my right to counsel, right to a hearing, right to present evidence, right to cross-examine witnesses, and right to appeal the Order of the Board revoking my certificate to practice medicine and surgery.

I, Norman W. Lefkovitz, M.D., hereby release the Board, its members, employees, agents, officers and representatives jointly and severally from any and all liability arising from the within matter.

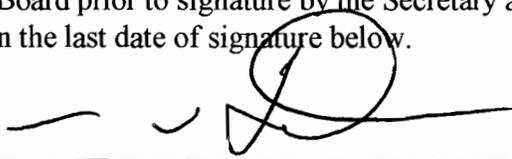
This document shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. Further, this information may be reported to appropriate organizations, data banks and governmental bodies. I, Norman W. Lefkovitz, acknowledge that my social security

number will be used if this information is so reported and agree to provide my social security number to the Board for such purposes.

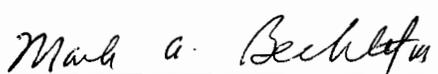
I stipulate and agree that I am taking the action described herein in lieu of formal disciplinary proceedings pursuant to Sections 4731.22(B)(6), (B)(18), (B)(19) and (B)(20), Ohio Revised Code.

EFFECTIVE DATE

It is expressly understood that this Permanent Surrender of Certificate 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.



NORMAN W. LEFKOVITZ, M.D.



MARK A. BECHTEL, M.D.
Secretary

10/31/14

DATE

11/5/2014

DATE

State of Florida :
County of Sarasota : SS



BRUCE R. SAFERIN, D.P.M.
Supervising Member

NOTARY VERIFICATION

On the 31 day of Oct,
2014, Norman Lefkowitz
(Affiant's name)

did personally appear before me and did swear to before me and subscribe in my presence the foregoing, acknowledging that the same was his free act and deed.

11-5-14

DATE



Notary Public/Attorney at Law



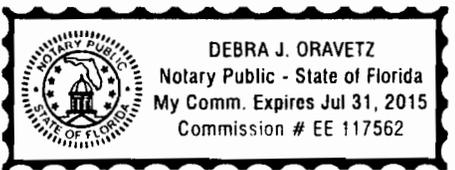
CHERYL D. POKORNY
Enforcement Attorney

My commission expires July 31, 2015

November 5, 2014

DATE

SEAL



MEDICAL BOARD
NOV 5 2014

**CONSENT AGREEMENT
BETWEEN
NORMAN W. LEFKOVITZ, M.D.
AND
THE STATE MEDICAL BOARD OF OHIO**

This CONSENT AGREEMENT is entered into by and between NORMAN W. LEFKOVITZ, M.D., and THE STATE MEDICAL BOARD OF OHIO, a state agency charged with enforcing Chapter 4731., Ohio Revised Code.

NORMAN W. LEFKOVITZ, M.D., voluntarily 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.

This CONSENT AGREEMENT contains the entire agreement between the parties, there being no other agreement of any kind, verbal or otherwise, which varies the terms of this CONSENT AGREEMENT.

This CONSENT AGREEMENT is entered into on the basis of the following stipulations, admissions and understandings:

- A. THE STATE MEDICAL BOARD OF OHIO is empowered by Section 4731.22(B)(20), 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 violating any rule promulgated by THE STATE MEDICAL BOARD OF OHIO, to wit: Rule 4731-10-08, Ohio Administrative Code, which requires an applicant to submit documentation of compliance with the Continuing Medical Education (CME) requirements as THE STATE MEDICAL BOARD OF OHIO may require.
- B. THE STATE MEDICAL BOARD OF OHIO enters into this CONSENT AGREEMENT in lieu of further formal proceedings based upon the violation of Section 4731.22(B)(20), Ohio Revised Code, as set forth in the Notice of Opportunity for Hearing issued by the BOARD on April 9, 1997, attached hereto as Exhibit A and incorporated herein by this reference. The BOARD expressly reserves the right to institute additional formal proceedings based upon any other violations of Chapter 4731., Ohio Revised Code, whether occurring before or after the effective date of this AGREEMENT.
- C. NORMAN W. LEFKOVITZ, M.D., is licensed to practice medicine and surgery in the State of Ohio.

98 AUG -4 AM 9:28

STATE MEDICAL BOARD
OF OHIO

- D. NORMAN W. LEFKOVITZ, M.D., ADMITS that, in completing his application card for registration of his certificate to practice medicine and surgery for the current registration period, he did certify that he had completed during the last biennial period of acquisition of CME (July 1, 1994 - June 30, 1996) the requisite hours of CME as required by Section 4731.281, Ohio Revised Code.
- E. NORMAN W. LEFKOVITZ, M.D., ADMITS that he failed to respond to the audit notices served upon him by the BOARD and that he failed to submit satisfactory documentation of his CME as required by the audit notices.
- F. NORMAN W. LEFKOVITZ, M.D., STATES that he had, in fact, timely completed the requisite hours of CME as required by Section 4731.281, Ohio Revised Code, and that he has since submitted documentation acceptable to the BOARD demonstrating such completion.
- G. NORMAN W. LEFKOVITZ, M.D., STATES and the BOARD ACKNOWLEDGES that, in resolution of the April 9, 1997 Notice of Opportunity for Hearing referenced above, DR. LEFKOVITZ and the BOARD entered into a consent agreement effective July 17, 1997, which is attached hereto and incorporated herein as Exhibit B.
- H. NORMAN W. LEFKOVITZ, M.D., STATES and the BOARD ACKNOWLEDGES that DR. LEFKOVITZ has maintained compliance with the terms of the July 14, 1997 consent agreement to date, and has submitted acceptable documentation of satisfactory completion of the requisite hours of CME for the July 1, 1996 - June 30, 1998 biennial acquisition period, as required by that consent agreement.
- I. This CONSENT AGREEMENT, upon becoming effective, shall supersede the July 17, 1997 CONSENT AGREEMENT between NORMAN W. LEFKOVITZ, M.D., and THE STATE MEDICAL BOARD OF OHIO.

WHEREFORE, in consideration of the foregoing and mutual promises hereinafter set forth, and in lieu of further formal proceedings at this time, NORMAN W. LEFKOVITZ, M.D., knowingly and voluntarily agrees with THE STATE MEDICAL BOARD OF OHIO to the following terms:

- 1. NORMAN W. LEFKOVITZ, M.D., is hereby REPRIMANDED for his failure to timely submit acceptable documentation to the BOARD of CME credits earned for the July 1, 1994 - June 30, 1996 biennial acquisition period.

2. NORMAN W. LEFKOVITZ, M.D., voluntarily agrees to submit documentation acceptable to the Board of satisfactory completion of the requisite hours of CME for each of the next two CME acquisition periods, such documentation to be filed in the Board's offices within thirty days following the completion of each CME acquisition period.
3. Should NORMAN W. LEFKOVITZ, M.D., elect not to renew his Ohio certificate during the duration of this agreement, DR. LEFKOVITZ shall notify the BOARD in writing prior to the date his CME documentation is due pursuant to paragraph 2, above. Periods of time during which DR. LEFKOVITZ does not maintain his certificate as current will not apply to the reduction of the two license registration periods for which he has agreed to submit documentation. Further, if the certificate of DR. LEFKOVITZ remains inactive for more than two years, the BOARD may impose additional requirements for reinstatement pursuant to Section 4731.222, Ohio Revised Code.

If, in the discretion of the Secretary and Supervising Member of the BOARD, DR. LEFKOVITZ 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 agreement.

NORMAN W. LEFKOVITZ, M.D., acknowledges that he has had an opportunity to ask questions concerning the terms of this CONSENT AGREEMENT and that all questions 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.

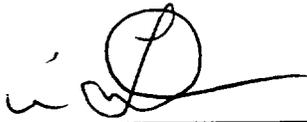
NORMAN W. LEFKOVITZ, M.D., hereby releases THE STATE MEDICAL BOARD OF OHIO, its members, employees, agents, officers and representatives jointly and severally from any and all liability arising from the within matter.

This CONSENT AGREEMENT shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. 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 that it shall become effective upon the last date of signature below.

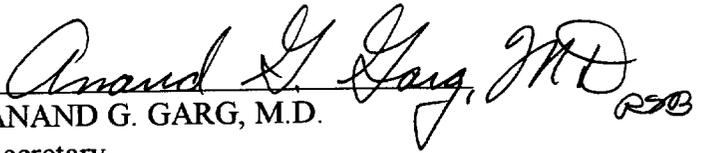
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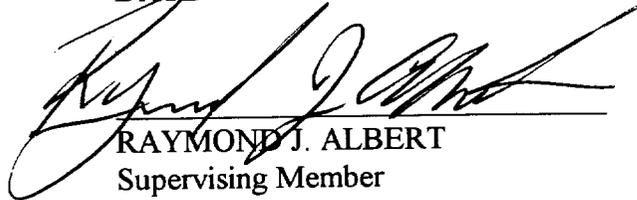
STATE MEDICAL BOARD OF OHIO


NORMAN W. LEFKOVITZ, M.D.

7/30/98
DATE


ANAND G. GARG, M.D.
Secretary

8/12/98
DATE


RAYMOND J. ALBERT
Supervising Member

8/12/98
DATE


ANNE BERRY STRAIT
Assistant Attorney General

STATE MEDICAL BOARD
OF OHIO
58 AUG -4 AM 9:28

**CONSENT AGREEMENT
BETWEEN
NORMAN W. LEFKOVITZ, M.D.
AND
THE STATE MEDICAL BOARD OF OHIO**

This CONSENT AGREEMENT is entered into by and between NORMAN W. LEFKOVITZ, M.D., and THE STATE MEDICAL BOARD OF OHIO, a state agency charged with enforcing Chapter 4731., Ohio Revised Code.

NORMAN W. LEFKOVITZ, M.D., voluntarily 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.

This CONSENT AGREEMENT contains the entire agreement between the parties, there being no other agreement of any kind, verbal or otherwise, which varies the terms of this CONSENT AGREEMENT.

This CONSENT AGREEMENT is entered into on the basis of the following stipulations, admissions and understandings:

- A. THE STATE MEDICAL BOARD OF OHIO is empowered by Section 4731.22(B)(20), 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 violating any rule promulgated by THE STATE MEDICAL BOARD OF OHIO, to wit: Rule 4731-10-08, Ohio Administrative Code, which requires an applicant to submit documentation of compliance with the Continuing Medical Education (CME) requirements as THE STATE MEDICAL BOARD OF OHIO may require.
- B. THE STATE MEDICAL BOARD OF OHIO enters into this CONSENT AGREEMENT in lieu of further formal proceedings based upon the violation of Section 4731.22(B)(20), Ohio Revised Code, set forth in the Notice of Opportunity for Hearing issued by the BOARD on April 9, 1997, attached hereto as Exhibit A and incorporated herein by this reference. The BOARD expressly reserves the right to institute additional formal proceedings based upon any other violations of Chapter 4731., Ohio Revised Code, whether occurring before or after the effective date of this AGREEMENT.

22 PM 3:35

10:11 PM 1:01

State of Ohio
OF OHIO

- C. **NORMAN W. LEFKOVITZ, M.D.**, is licensed to practice medicine and surgery in the State of Ohio.
- D. **NORMAN W. LEFKOVITZ, M.D.**, ADMITS that, in completing his application card for registration of his certificate to practice medicine and surgery for the current registration period, he did certify that he had completed during the last biennial period of acquisition of CME (July 1, 1994 - June 30, 1996) the requisite hours of CME as required by Section 4731.281, Ohio Revised Code.
- E. **NORMAN W. LEFKOVITZ, M.D.**, ADMITS that he failed to respond to the audit notices served upon him by the BOARD and that he failed to submit satisfactory documentation of his CME as required by the audit notices.
- F. **NORMAN W. LEFKOVITZ, M.D.**, STATES that he had, in fact, timely completed the requisite hours of CME as required by Section 4731.281, Ohio Revised Code, and that he has now submitted documentation acceptable to the BOARD demonstrating such completion.

WHEREFORE, in consideration of the foregoing and mutual promises hereinafter set forth, and in lieu of further formal proceedings at this time, **NORMAN W. LEFKOVITZ, M.D.**, knowingly and voluntarily agrees with THE STATE MEDICAL BOARD OF OHIO to the following terms, conditions and limitations:

- 1. **NORMAN W. LEFKOVITZ, M.D.**, is hereby REPRIMANDED for his failure to timely submit acceptable documentation to the BOARD of CME credits earned for the biennial period of acquisition of July 1, 1994 - June 30, 1996.
- 2. The certificate of **NORMAN W. LEFKOVITZ, M.D.**, to practice medicine and surgery in the State of Ohio shall be subject to the following PROBATIONARY terms, conditions and limitations for the next three (3) biennial registration periods:
 - (a) **NORMAN W. LEFKOVITZ, M.D.**, shall submit documentation acceptable to the BOARD of satisfactory completion of the requisite hours of CME. Such documentation shall be due in the BOARD's offices no later than thirty (30) days after the stated deadline for filing the application for renewal.

OFFICE OF THE CLERK
 STATE MEDICAL BOARD
 OF OHIO
 22 PM 3:35
 97 JUL 11 PM 1:00

(b) Should NORMAN W. LEFKOVITZ, M.D., elect not to renew his Ohio certificate during the duration of this agreement, DOCTOR LEFKOVITZ shall notify the BOARD in writing prior to the date his CME documentation is due pursuant to paragraph 2(a). Periods of time during which DOCTOR LEFKOVITZ does not maintain his certificate as current will not apply to the reduction of the three (3) biennial registration periods for which documentation must be submitted. Further, if DOCTOR LEFKOVITZ's certificate remains inactive for more than two years, the Board may impose additional requirements for reinstatement pursuant to Section 4731.222, Ohio Revised Code.

If, in the discretion of the Secretary and Supervising Member of the BOARD, DOCTOR LEFKOVITZ 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 Agreement.

DOCTOR LEFKOVITZ 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.

DOCTOR LEFKOVITZ hereby releases THE STATE MEDICAL BOARD OF OHIO, 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. 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 that it shall become effective upon the last date of signature below.

STATE MEDICAL BOARD OF OHIO
JUL 22 PM 3:35
STATE MEDICAL BOARD OF OHIO
JUL 11 PM 1:00

Further, this information may be reported to appropriate organizations, data banks and governmental bodies.



NORMAN W. LEFKOVITZ, M.D., M.D.



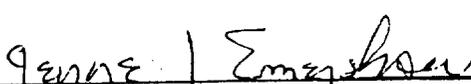
THOMAS E. GRETER, M.D.
Secretary

6/18/97

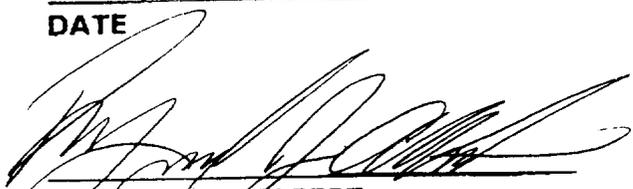
DATE

7/14/97

DATE



GEORGE EMERSHAW, ESQ.
Attorney for Norman W. Lefkowitz, M.D.



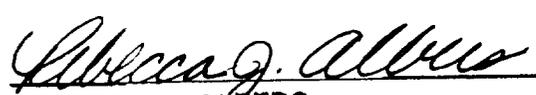
RAYMOND J. ALBERT
Supervising Member

6/10/97

DATE

7/17/97

DATE



REBECCA J. ALBERS
Assistant Attorney General

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RECEIVED
OFFICE OF THE
ATTORNEY GENERAL
OF OHIO
JUL 22 PM 3:36
JUL 11 PM 1:00

**STATE MEDICAL BOARD OF OHIO**

77 South High Street, 17th Floor • Columbus, Ohio 43266-0315 • (614) 466-3934

April 9, 1997

Norman W. Lefkovitz, M.D.
60 North Miller Road
Fairlawn, OH 44333

Dear Dr. Lefkovitz:

In accordance with Chapter 119., Ohio Revised Code, you are hereby notified that the State Medical Board of Ohio intends to determine whether or not to limit, revoke, suspend, refuse to register or reinstate your certificate to practice medicine and surgery, or to reprimand or place you on probation for one or more of the following reasons:

- (1) In applying for registration of your certificate to practice medicine or surgery for the current registration period, you certified that you had completed during the last biennial period of acquisition of Continuing Medical Education (CME) (July 1, 1994 - June 30, 1996) the requisite hours of CME as required by Section 4731.281, Ohio Revised Code.
- (2) By a certified mail letter dated October 1, 1996, for which your agent signed on October 3, 1996, the State Medical Board of Ohio informed you that you were required to complete a log listing your CME for the July 1, 1994 - June 30, 1996, period and to provide documentation that you had actually completed at least forty (40) hours of Category I CME credits. By certified mail letter dated January 15, 1997, for which your agent signed on January 17, 1997, the State Medical Board again requested that you submit documentation of your CME credits for the July 1, 1994 - June 30, 1996, period. You have not responded to either of the above notices. You have failed to submit any documentation of CME completed for the above period.
- (3) Your lack of response to the notices as detailed in the above paragraph (2) rebuts the presumption under Rule 4731-10-08(A), Ohio Administrative Code, that you did complete the requisite hours of CME, and/or demonstrates that you failed to keep detailed records of CME taken.

Your acts, conduct and/or omissions in certifying to the State Medical Board that you had completed the statutorily required CME, as set forth in the above paragraph (1), when you had not, in fact, done so, constitute "fraud, misrepresentation, or deception in applying for or securing any license or certificate issued by the board," as that clause is used in Section 4731.22(A), Ohio Revised Code.

mailed 4/14/97

Further, your acts, conduct and/or omissions in certifying to the State Medical Board that you had completed the statutorily required CME, as set forth in the above paragraph (1), when you had not, in fact, done so, constitute "publishing a false, fraudulent, deceptive, or misleading statement," as that clause is used in Section 4731.22(B)(5), Ohio Revised Code.

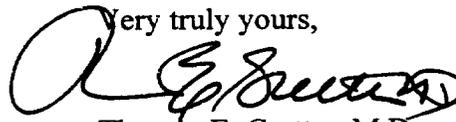
Further, your failure to respond to the audit notices, to obtain the requisite CME, and/or to submit documentation of same, as alleged in the above paragraphs (2) and (3), constitutes "violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provisions of this chapter or any rule promulgated by the board," as that clause is used in Section 4731.22(B)(20), Ohio Revised Code, to wit: Section 4731.281, Ohio Revised Code, and Rules 4731-10-03 and 4731-10-08 (as in effect prior to October 31, 1996), Ohio Administrative Code.

Pursuant to Chapter 119., Ohio Revised Code, you are hereby advised that you are entitled to a hearing in this matter. If you wish to request such hearing, the request must be made in writing and must be received in the offices of the State Medical Board within thirty (30) days of the time of mailing of this notice.

You are further advised that you are entitled to appear at such hearing in person, or by your attorney, or by such other representative as is permitted to practice before this agency, or you may present your position, arguments, or contentions in writing, and that at the hearing you may present evidence and examine witnesses appearing for or against you.

In the event that there is no request for such hearing received within thirty (30) days of the time of mailing of this notice, the State Medical Board may, in your absence and upon consideration of this matter, determine whether or not to limit, revoke, suspend, refuse to register or reinstate your certificate to practice medicine and surgery or to reprimand or place you on probation.

Copies of the applicable sections are enclosed for your information.

Very truly yours,

Thomas E. Gretter, M.D.
Secretary

TEG/bjs
Enclosures

CERTIFIED MAIL # P 152 984 660
RETURN RECEIPT REQUESTED

rev. 2/15/95