STATE OF OHIO
THE STATE MEDICAL BOARD
SURRENDER OF CERTIFICATE
TO PRACTICE MEDICINE AND SURGERY
BY CARL MICHAEL FERRARO, M.D.

I, Carl Michael Ferraro, M.D., having been formally charged by issuance of a Notice of Opportunity for Hearing, on or about September 14, 2005, am aware of my rights to representation by counsel and of having a formal adjudicative hearing, and do hereby freely execute this document and choose to take the actions described herein.

I, Carl Michael Ferraro, M.D., do hereby voluntarily, knowingly, and intelligently SURRENDER my certificate to practice medicine and surgery, No. 35.049581, 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 that 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 No. 35.049581 or issuance of any other certificate pursuant to Chapters 4730, 4731, 4760, or 4762, Ohio Revised Code, on or after the date of signing this Surrender of Certificate to Practice Medicine and Surgery for a period of five years. If I apply for restoration of my certificate or issuance of any other certificate following the five year period of ineligibility, I understand that I must comply with all procedures in effect at that time for such application. Further, I understand pursuant to Section 4731.222, Ohio Revised Code, the State Medical Board may exercise its discretion to require additional evidence of my fitness to resume practice.

I, Carl Michael Ferraro, 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, Carl Michael Ferraro, 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.

It is expressly understood that this 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.

I stipulate and agree that I am taking the action described herein in lieu of further formal disciplinary proceedings, pursuant to Section 4731.22(B)(22), Ohio Revised Code, as set forth in the Notice of Opportunity for Hearing [Notice] issued to me by the Board on or about September 14, 2005, a copy of which is attached hereto and fully incorporated herein. I further admit to all the factual and legal allegations set forth in the Notice.

Signed this 12 day of January, 2006.

CARL MICHAEL FERRARO, M.D.

WITNESS

WITNESS

Sworn to and subscribed before me this 12 day of January, 2006.

OFFICIAL SEAL
Brenda Fuller
Notary Public, State of Illinois
615066
My Comm. Exp. 11-22-2008

SEAL

NOTARY PUBLIC

(This form must be either witnessed OR notarized)

LANCE A. TALMAGE, M.D.
SECRETARY

2-8-06
DATE

RAYMOND J. ALBERT
SUPERVISING MEMBER

2/8/06
DATE

State Medical Board of Ohio

77 S. High St., 17th Floor • Columbus, OH 43215-6127 • (614) 466-3934 • Website: www.med.ohio.gov

September 14, 2005

Carl Michael Ferraro, M.D.
13223 Jean Creek Drive
Orland Park, Illinois 60462

Dear Doctor Ferraro:

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

(1) On or about October 20, 2003, the Illinois Department of Professional Regulation [Illinois Board] approved a Consent Order in Case No. 2002-033411 and No. 2002-033412, which reprimanded your Illinois Physician and Surgeon License and placed your Illinois Controlled Substance License on probation for a period of two (2) years.

In the Consent Order you admitted that you prescribed and/or provided controlled substances to your wife for several years without the benefit of physical examination or proper documentation and without consulting her treating physicians.

A copy of the Illinois Board Consent Order is attached hereto and incorporated herein.

The Illinois Board Consent Order, as alleged in paragraph (1) above, constitutes "[a]ny of the following actions taken by the agency responsible for regulating the practice of medicine and surgery, osteopathic medicine and surgery, podiatric medicine and surgery, or the limited branches of medicine in another jurisdiction, for any reason other than the nonpayment of fees: the limitation, revocation, or suspension of an individual's license to practice; acceptance of an individual's license surrender; denial of a license; refusal to renew or reinstate a license; imposition of probation; or issuance of an order of censure or other reprimand," as that clause is used in Section 4731.22(B)(22), Ohio Revised Code.

MAILED 9-15-05

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 days of the time of mailing of this notice.

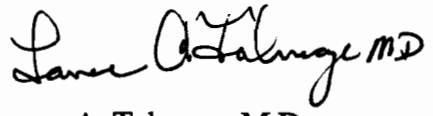
You are further advised that, if you timely request a hearing, you are entitled to appear at such hearing in person, or by your attorney, or by such other representative as is permitted to practice before this agency, or you may present your position, arguments, or contentions in writing, and that at 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 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, permanently revoke, suspend, refuse to register or reinstate your certificate to practice medicine and surgery or to reprimand you or place you on probation.

Please note that, whether or not you request a hearing, Section 4731.22(L), Ohio Revised Code, provides that "[w]hen the board refuses to grant a certificate to an applicant, revokes an individual's certificate to practice, refuses to register an applicant, or refuses to reinstate an individual's certificate to practice, the board may specify that its action is permanent. An individual subject to a permanent action taken by the board is forever thereafter ineligible to hold a certificate to practice and the board shall not accept an application for reinstatement of the certificate or for issuance of a new certificate."

Copies of the applicable sections are enclosed for your information.

Very truly yours,



Lance A. Talmage, M.D.
Secretary

LAT/blt
Enclosures

CERTIFIED MAIL # 7003 0500 0002 4333 4666
RETURN RECEIPT REQUESTED

STATE OF ILLINOIS
DEPARTMENT OF PROFESSIONAL REGULATION

DEPARTMENT OF PROFESSIONAL REGULATION of the State of Illinois,	Complainant	)	
v.		)	No. 2002-033411
		)	2002-033412
CARL FERRARO License No. 036-070690, Controlled Sub. Lics. No. 336-034562	Respondent	)	

CONSENT ORDER

The Department of Professional Regulation by Heather M. Ast, one of its attorneys, and Carl Ferraro, Respondent, hereby agree to the following:

STIPULATIONS

Carl Ferraro is licensed as a Physician and Surgeon in the State of Illinois, holding license No. 036-070690. Respondent is also the holder of a certificate of registration for controlled substances, license No. 336-034562. At all times material to the matter set forth in this Consent Order, the Department of Professional Regulation of the State of Illinois had jurisdiction over the subject matter and parties herein.

Information has come to attention of the Department that Respondent prescribed and/or provided controlled substances to his wife for several years without the benefit of physical examination or proper documentation and without consulting her treating physicians.

The allegation(s) as set forth herein, if proven to be true would constitute grounds for suspending or revoking Respondent's license as a Physician and Surgeon on the authority of 225 Illinois Compiled Statutes 60/22(5) and (41).

As a result of the foregoing allegation(s), the Department held an Informal Disciplinary Conference on May 7, 2003, at the offices of the Department, 100 West Randolph, Chicago, Illinois. The Respondent appeared in person on that date and was represented by attorney William Coughlin. Dr.

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Donald G. Langsley appeared as a member of the Medical Disciplinary Board of the State of Illinois and Heather M. Ast appeared as an attorney for the Department.

Respondent admits the allegations raised by the Department. Respondent has been advised of the right to have the pending allegation(s) reduced to written charges, the right to a hearing, the right to contest any charges brought, and the right to administrative review of any Order resulting from a hearing. Respondent knowingly waives each of these rights, as well as any right to administrative review of this Consent Order.

Respondent and the Department have agreed, in order to resolve this matter, that Respondent be permitted to enter into a Consent Order with the Department, providing for the imposition of disciplinary measures which are fair and equitable in the circumstances and which are consistent with the best interests of the people of the State of Illinois.

CONDITIONS

WHEREFORE, the Department, through Heather M. Ast, its attorney, and Carl Ferraro, agree:

A. Respondent's Physician and Surgeon License (No. 036-070690) shall be reprimanded.

B. Respondent's controlled substance License, No. 336-034562, shall be placed on probation for period of 2 years. During the term of probation, Respondent shall maintain a dispensing log for all controlled substances and a list of all controlled substances prescribed. Respondent shall submit copies of these logs to the Department's Probation Compliance Unit on a quarterly basis.

C. All reports required to be submitted to the Department pursuant to this Consent Order shall be sent to: Department of Professional Regulation, Attn: Probation Compliance Unit, 100 West Randolph Street, Suite 9-300, Chicago, Illinois 60601.

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D. Any violation by Respondent of the terms and conditions of this Consent Order shall be grounds for the Department to immediately file a Complaint to revoke the Respondent's license to practice as a Physician and Surgeon in the State of Illinois.

E. This Consent Order shall become effective upon the signing and approval by the Director of the Department.

DEPARTMENT OF PROFESSIONAL REGULATION of the State of Illinois

Sept 17, 03
DATE

Heather M. Ast, Attorney for the Department

8/29/03
DATE

Carl Ferraro, Respondent

9/17/03
DATE

William Coughlin, Attorney for the Respondent

10-1-03
DATE

Member, Illinois Medical Disciplinary Board

The foregoing Consent Order is approved in full.

DATED THIS 20th day of October, 20 03.

DEPARTMENT OF PROFESSIONAL REGULATION
of the State of Illinois

DIRECTOR

:hma

REF: License No. 036-070690,
336-034562
Case No. 2002-033411,
2002-033412

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STATE OF ILLINOIS
DEPARTMENT OF PROFESSIONAL REGULATION

DEPARTMENT OF PROFESSIONAL REGULATION of the State of Illinois, Complainant	)	
v.	)	NO. 2002-03341-1&2
CARL FERRARO Respondent)	)	

NOTICE

TO: CARL FERRARO
13223 JEAN CREEK ROAD
ORLAND PARK, IL 60462

PLEASE TAKE NOTICE that the Director of the Department of Professional Regulation did sign the attached Consent Order.

The Order of the Director of the Department of Professional Regulation will be implemented as of the date of the Order unless the Order states otherwise.

DEPARTMENT OF PROFESSIONAL REGULATION
of the State of Illinois

BY: Traci L Ordway
Clerk for the Department

All inquiries should be directed
to the Prosecutions Unit
312/814-4477

OHIO STATE MEDICAL BOARD
JUL 12 2004

STATE OF ILLINOIS)
) ss:
COUNTY OF SANGAMON)

UNDER PENALTY of perjury, as provided by law pursuant to Section 1-109 of the Illinois Code of Civil Procedure, the undersigned certifies that I caused copies of the attached NOTICE AND ORDER, to be deposited in the United States mail, by CERTIFIED mail at 320 W. Washington, Springfield, Illinois 62786, before 5:00 p.m. with proper postage prepaid on the 20th day of October, 2003 to all parties at the addresses listed on the attached documents.

Traci S Ordway

AFFIANT

OHIO STATE MEDICAL BOARD
JUL 12 2004