



State Medical Board of Ohio

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May 10, 2007

Bassem Mehrim Rimlawi, M.D.
Audi Bank Building
Riyad Solh Street
Saida, Lebanon

Dear Doctor Rimlawi:

Please find enclosed certified copies of the Entry of Order; the Report and Recommendation of Gretchen L. Petrucci, Attorney Hearing Examiner, State Medical Board of Ohio; and an excerpt of draft Minutes of the State Medical Board, meeting in regular session on May 10, 2007, including motions approving and confirming the Findings of Fact and Conclusions of the Hearing Examiner, and adopting an amended Order.

Section 119.12, Ohio Revised Code, may authorize an appeal from this Order. Such an appeal must be taken to the Franklin County Court of Common Pleas.

Such an appeal setting forth the Order appealed from and the grounds of the appeal must be commenced by the filing of an original Notice of Appeal with the State Medical Board of Ohio and a copy of the Notice of Appeal with the Franklin County Court of Common Pleas. Any such appeal must be filed within fifteen (15) days after the mailing of this notice and in accordance with the requirements of Section 119.12, Ohio Revised Code.

THE STATE MEDICAL BOARD OF OHIO

Lance A. Talmage, M.D.
Secretary

LAT:jam
Enclosures

REGISTERED MAIL NO. RR 323 469 798 US
RETURN RECEIPT REQUESTED

Cc: Eric J. Plinke, Esq.
CERTIFIED MAIL NO. 91 7108 2133 3931 8317 0497
RETURN RECEIPT REQUESTED

Mailed 5.30.07

CERTIFICATION

I hereby certify that the attached copy of the Entry of Order of the State Medical Board of Ohio; Report and Recommendation of Gretchen L. Petrucci, State Medical Board Attorney Hearing Examiner; and excerpt of draft Minutes of the State Medical Board, meeting in regular session on May 10, 2007, including motions approving and confirming the Findings of Fact and Conclusions of the Hearing Examiner, and adopting an amended Order; constitute a true and complete copy of the Findings and Order of the State Medical Board in the matter of Bassem Mehrim Rimlawi, M.D., as it appears in the Journal of the State Medical Board of Ohio.

This certification is made by authority of the State Medical Board of Ohio and in its behalf.



Lance A. Talmage, M.D.
Secretary

(SEAL)

May 10, 2007

Date

BEFORE THE STATE MEDICAL BOARD OF OHIO

IN THE MATTER OF

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BASSEM MEHRIM RIMLAWI, M.D.

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ENTRY OF ORDER

This matter came on for consideration before the State Medical Board of Ohio on May 10, 2007.

Upon the Report and Recommendation of Gretchen L. Petrucci, State Medical Board Attorney Hearing Examiner, designated in this Matter pursuant to R.C. 4731.23, a true copy of which Report and Recommendation is attached hereto and incorporated herein, and upon the modification, approval and confirmation by vote of the Board on the above date, the following Order is hereby entered on the Journal of the State Medical Board of Ohio for the above date.

It is hereby ORDERED that:

- A. REPRIMAND: Bassem Mehrim Rimlawi, M.D., is REPRIMANDED.
- B. CONDITIONS FOR RESTORATION: Following Dr. Rimlawi's submission of an application for restoration, accompanied by appropriate fees if any, the Board shall not consider restoration of Dr. Rimlawi's expired certificate to practice medicine and surgery until all of the following conditions have been met:
 1. Certification of Compliance with the May 18, 2006, Consent Order of the New York Board: At the time he submits his application for restoration, Dr. Rimlawi shall submit to the Board certification from the New York State Board for Professional Medical Conduct [New York Board], dated no earlier than sixty days prior to Dr. Rimlawi's application for restoration, that Dr. Rimlawi has maintained full compliance with the May 18, 2006, Consent Order of the New York Board.
 2. Evidence of Unrestricted Licensure in Other States, Besides New York, and in Other Countries: At the time he submits his application for restoration,

Dr. Rimlawi shall provide written documentation acceptable to the Board verifying that Dr. Rimlawi otherwise holds a full and unrestricted license to practice medicine and surgery in all other states (besides New York) and in all other countries in which he is licensed at the time of application or has been in the past licensed, or that he would be entitled to such license but for the non-payment of renewal fees.

3. Post-Licensure Competency Assessment Program [CAP]: At the time he submits his application for restoration, Dr. Rimlawi shall submit a Learning Plan developed for Dr. Rimlawi by the Post-Licensure Assessment System sponsored by the Federation of State Medical Boards and the National Board of Medical Examiners, or another CAP approved in advance by the Board. The CAP Learning Plan shall have been developed subsequent to the issuance of a written Assessment Report, based on an assessment and evaluation of Dr. Rimlawi by the CAP approved by the Board.
 - a. Prior to the initial assessment by the CAP, Dr. Rimlawi shall furnish the CAP copies of the Board's Order, including the Summary of the Evidence, Findings of Fact, and Conclusions of Law, and any other documentation from the hearing record which the Board may deem appropriate or helpful to that assessment.
 - b. Dr. Rimlawi shall assure that, within ten days of its completion, the written Assessment Report compiled by the CAP is submitted to the Board. Moreover, Dr. Rimlawi shall ensure that the written Assessment Report includes the following:
 - A detailed plan of recommended practice limitations, if any;
 - Any recommended education;
 - Any recommended mentorship or preceptorship;
 - Any reports upon which the recommendation is based, including reports of physical examination and psychological or other testing.
 - c. Any CAP Learning Plan developed for Dr. Rimlawi shall be subject to Board review and approval prior to its implementation. The Board shall have the right to amend, supplement, or otherwise modify the CAP Learning Plan.
 - d. Dr. Rimlawi shall successfully complete the educational activities in the Approved Learning Plan, including any final assessment or evaluation.

Upon successful completion of the educational activities, including any final assessment or evaluation, Dr. Rimlawi shall provide the Board with satisfactory documentation from the CAP indicating that Dr. Rimlawi has successfully completed the Approved Learning Plan's educational activities.

- e. Dr. Rimlawi's participation in the CAP shall be at his own expense.
4. Additional Evidence of Fitness To Resume Practice: In the event that Dr. Rimlawi has not been engaged in the active practice of medicine and surgery for a period in excess of two years prior to application for restoration, the Board may require additional evidence of his fitness to resume practice.
- C. PROBATION: Upon restoration, Dr. Rimlawi's certificate shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least three years:
1. Obey the Law: Dr. Rimlawi shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in the state or country in which he is practicing.
 2. Declarations of Compliance: Dr. Rimlawi shall submit quarterly declarations under penalty of Board disciplinary action or criminal prosecution, stating whether there has been compliance with all the conditions of this Order. The first quarterly declaration must be received in the Board's offices on or before the first day of the third month following the month in which Dr. Rimlawi's certificate is restored. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.
 3. Personal Appearances: Dr. Rimlawi shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which Dr. Rimlawi's certificate is restored, or as otherwise directed by the Board. Subsequent personal appearances must occur every three months thereafter, and/or as otherwise requested by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.
 4. Post-Licensure Competency Assessment Program [CAP]: Dr. Rimlawi shall practice in accordance with the Board-Approved Learning Plan, unless otherwise determined by the Board. Dr. Rimlawi shall cause to be submitted to the Board quarterly declarations from the CAP documenting Dr. Rimlawi's continued compliance with the Approved Learning Plan.

Dr. Rimlawi shall obtain the Board's prior approval for any deviation from the Approved Learning Plan.

If, without permission from the Board, Dr. Rimlawi fails to comply with the Approved Learning Plan, Dr. Rimlawi shall cease practicing medicine and surgery beginning the day following Dr. Rimlawi's receipt of notice from the Board of such violation and shall refrain from practicing until the CAP provides written notification to the Board that Dr. Rimlawi has reestablished compliance with the Approved Learning Plan. Practice during the period of noncompliance shall be considered unlicensed practice in violation of Section 4731.41, Ohio Revised Code.

5. Practice Plan: Within thirty days of the date of the restoration of Dr. Rimlawi's certificate, and prior to Dr. Rimlawi's commencement of practice in Ohio, or as otherwise determined by the Board, Dr. Rimlawi shall submit to the Board and receive its approval for a plan of practice in Ohio. The practice plan, unless otherwise determined by the Board, shall be limited to a supervised structured environment in which Dr. Rimlawi's activities will be directly supervised and overseen by a monitoring physician approved by the Board. Dr. Rimlawi shall obtain the Board's prior approval for any alternation to the practice plan approved pursuant to this Order.

At the time Dr. Rimlawi submits his practice plan, he shall also submit the name and curriculum vitae of a monitoring physician for prior written approval by the Secretary or Supervising Member of the Board. In approving an individual to serve in this capacity, the Secretary and Supervising Member will give preference to a physician who practices in the same locale as Dr. Rimlawi and who is engaged in the same or similar practice specialty.

The monitoring physician shall monitor Dr. Rimlawi and his medical practice, and shall review Dr. Rimlawi's patient charts. The chart review may be done on a random basis, with the frequency and number of charts reviewed to be determined by the Board.

Further, the monitoring physician shall provide the Board with reports on the monitoring of Dr. Rimlawi and his medical practice, and on the review of Dr. Rimlawi's patient charts. Dr. Rimlawi shall ensure that the reports are forwarded to the Board on a quarterly basis and are received in the Board's offices no later than the due date for Dr. Rimlawi's quarterly declaration.

In the event that the designated monitoring physician becomes unable or unwilling to serve in this capacity, Dr. Rimlawi must immediately so notify the Board in writing. In addition, Dr. Rimlawi shall make arrangements acceptable to the Board for another monitoring physician within thirty days after the previously designated monitoring physician becomes unable or

unwilling to serve, unless otherwise determined by the Board. Furthermore, Dr. Rimlawi shall ensure that the previously designated monitoring physician also notifies the Board directly of his or her inability to continue to serve and the reasons therefore.

6. Absence from Ohio: In the event that Dr. Rimlawi should leave Ohio for three continuous months, or reside or practice outside the State, Dr. Rimlawi must notify the Board in writing of the dates of departure and return. Periods of time spent outside Ohio will not apply to the reduction of the probationary period under this Order, unless otherwise determined by the Board in instances where the Board can be assured that probationary monitoring is otherwise being performed.
7. Noncompliance Will Not Reduce Probationary Period: In the event Dr. Rimlawi is found by the Secretary of the Board to have failed to comply with any provision of this Order, and is so notified of that deficiency in writing, such period(s) of noncompliance will not apply to the reduction of the probationary period under this Order.

D. **TERMINATION OF PROBATION AND PERMANENT LIMITATIONS AND RESTRICTIONS**: Upon successful completion of probation, as evidenced by a written release from the Board, Dr. Rimlawi's certificate will be restored but shall thereafter be permanently LIMITED and RESTRICTED as follows:

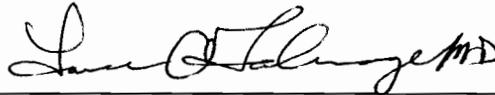
1. Dr. Rimlawi shall not practice obstetrics, including but not limited to prenatal care, care of patients in labor and delivery, and postpartum care.
2. Dr. Rimlawi shall not prescribe or dispense any controlled substances.

E. **VIOLATION OF THE TERMS OF THIS ORDER**: If Dr. Rimlawi violates the terms of this Order in any respect, the Board, after giving him notice and the opportunity to be heard, may institute whatever disciplinary action it deems appropriate, up to and including the permanent revocation of his certificate.

F. **REQUIRED REPORTING TO EMPLOYERS AND HOSPITALS**: Within thirty days of the effective date of this Order, or as otherwise determined by the Board, Dr. Rimlawi shall provide a copy of this Order 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. Rimlawi shall provide a copy of this Order 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 until Dr. Rimlawi receives from the Board written notification of his successful completion of probation.

- G. **REQUIRED REPORTING TO OTHER LICENSING AUTHORITIES:** Within thirty days of the effective date of this Order, or as otherwise determined by the Board, Dr. Rimlawi shall provide a copy of this Order 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. Rimlawi shall also provide a copy of this Order by certified mail, return receipt requested, at the time of application to the proper licensing authority of any state or jurisdiction in which he applies for any professional license or reinstatement or restoration of any professional license. Further, Dr. Rimlawi shall provide this Board with a copy of the return receipt as proof of notification within thirty days of receiving that return receipt, unless otherwise determined by the Board. This requirement shall continue until Dr. Rimlawi receives from the Board written notification of his successful completion of probation.

This Order shall become effective immediately upon the mailing of notification of approval by the Board.



Lance A. Talmage, M.D.
Secretary

(SEAL)

May 10, 2007

Date

**REPORT AND RECOMMENDATION
IN THE MATTER OF BASSEM MEHRIM RIMLAWI, M.D.**

The Matter of Bassem Mehrim Rimlawi, M.D., was heard by Gretchen L. Petrucci, Hearing Examiner for the State Medical Board of Ohio, on February 8, 2007.

INTRODUCTION

I. Basis for Hearing

- A. By letter dated July 12, 2006, the State Medical Board of Ohio [Board] notified Bassem Mehrim Rimlawi, M.D., that it had proposed to take disciplinary action against his certificate to practice medicine and surgery in Ohio. The Board's action was based on an allegation that the New York State Board for Professional Medical Conduct [New York Board] entered a Consent Order that subjected Dr. Rimlawi's license to practice medicine in the state of New York to permanent restrictions, including restrictions from practicing obstetrics and from prescribing or dispensing any controlled substances, and imposed certain probationary terms for a period of three years.

The Board further alleged that the New York Consent Order 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 language is used in Section 4731.22(B)(22), Ohio Revised Code. (State's Exhibit 1A)

- B. On September 20, 2006, Dr. Rimlawi requested a hearing. (State's Exhibit 1B)

II. Appearances

- A. On behalf of the State of Ohio: Marc Dann, Attorney General, by Damion M. Clifford, Assistant Attorney General.
- B. On behalf of the Respondent: Eric J. Plinke, Esq.

EVIDENCE EXAMINED

I. Testimony Heard

No witnesses were presented.

II. Exhibits Examined

A. State's Exhibits

State's Exhibits 1A through 1K: Procedural exhibits.

State's Exhibit 2: Certified copy of the May 18, 2006, New York Board Consent Order and accompanying Consent Agreement and Order.

B. Respondent's Exhibits

Respondent's Exhibit A: Letter from Dr. Rimlawi to the Board.

Respondent's Exhibit B: Dr. Rimlawi's curriculum vitae.

Respondent's Exhibit C: Two letters of recommendation from Francesco Porcarelli, M.D., and four letters of appreciation from Gerald C. Kempthorne, M.D.

SUMMARY OF THE EVIDENCE

All exhibits, even if not specifically mentioned, were thoroughly reviewed and considered by the Hearing Examiner prior to preparing this Report and Recommendation.

Background

1. Bassem Mehrim Rimlawi, M.D., obtained a bachelor of science degree from the American University of Beirut and, in 1963, obtained a medical degree from the Medical School of the American University of Beirut, Lebanon. After that, he participated in an internship in 1963 at the American University of Beirut Hospital and he practiced medicine ("mostly maternal and child health care") at ARAMCO Hospital in Saudi Arabia from 1963 to 1966. From 1966 to 1969, he completed a three-year residency in obstetrics and gynecology [OB/GYN] at the American University of Beirut Hospital. In 1970, he completed a fourth year of residency in OB/GYN at Cleveland Metropolitan General Hospital in Cleveland, Ohio. (Respondent's Exhibit [Resp. Ex.] B)
2. Dr. Rimlawi worked from 1971 to 1975 as Chief of Obstetrics and Gynecology Service at As-Sharq Hospital in Al-Khobar, Saudi Arabia. Then, for two years, he worked as an OB/GYN consultant at King Faisal Specialist Hospital and Research Center in Riyadh, Saudi Arabia. For

the next five years, Dr. Rimlawi had a private practice in OB/GYN in Saida, Lebanon. In 1984, Dr. Rimlawi returned to the United States and became Chief of Obstetrics and Gynecology Service at the Adirondack Medical Center in Saranac Lake, New York. He remained there for four years. In 1988, he became Chief of Obstetrics and Gynecology Service at Columbus Community Hospital in Columbus, Wisconsin. In 1993, Dr. Rimlawi returned to New York and took an attending staff position with the Department of Obstetrics and Gynecology at the Crouse Irving Memorial Hospital in Syracuse, New York. He was also a clinical instructor at the State University of New York at Syracuse and had a private medical practice. He remained in New York until 2001. In 2002, Dr. Rimlawi returned to Saida, Lebanon, where he currently resides and provides consulting services. (Resp. Ex. B)

3. Dr. Rimlawi's curriculum vitae reflects that he is a certified diplomate of the American Board of Obstetrics and Gynecology, a fellow of the American College of Obstetricians and Gynecologists, and a fellow of the American Society of Reproductive Medicine. (Resp. Ex. B)
4. Dr. Rimlawi holds a medical license in New York and previously held a medical certificate in Ohio. His Ohio certificate expired on April 1, 2004. (Resp. Ex. A; Ohio eLicense Center, March 19, 2007 <<https://license.ohio.gov/Lookup/SearchDetail.asp?ContactIdnt=2967618&DivisionIdnt=78&Type=L>>)

New York Board's 2006 Disciplinary Action and Dr. Rimlawi's Response

5. The New York Board issued a Consent Order on May 18, 2006, in which it adopted a consent agreement between Dr. Rimlawi and the New York Board. The consent agreement recites that the New York Board had charged Dr. Rimlawi with four specifications of professional misconduct. The agreement also reflects that Dr. Rimlawi did not contest the factual allegations in the charges. (State's Exhibit [St. Ex.] 2)
6. The factual allegations, which Dr. Rimlawi did not contest, involve his treatment of eight patients between August 1996 and June 2000, while Dr. Rimlawi maintained a medical practice and worked at The Hospital in Sidney, New York. The New York Board alleged that the acts constituted professional misconduct by: "practicing medicine with negligence on more than one occasion," "practicing medicine with incompetence on more than one occasion," "failing to use scientifically accepted barrier precautions and infection control practices," and "performing professional services [that had] not been duly authorized by the patient," in violation of New York Education Law §§6530(3), 6530(5), 6530(47) and 6530(26). (St. Ex. 2 at 9-13)
7. Dr. Rimlawi agreed to a penalty of: (a) a permanent restriction against practicing obstetrics in the State of New York, including but not limited to prenatal care, care of patients in labor and in delivery, and postpartum care; (b) a permanent restriction from prescribing or dispensing any controlled substances, including the surrender of his DEA controlled substance certificate, privileges, and any DEA U.S. Official Order forms Schedules 1 and 2; and (c) probationary terms for a period of three years. (St. Ex. 2 at 5-6)

8. In a letter to the Board that was presented at hearing, Dr. Rimlawi explained the circumstances surrounding the New York matter. Dr. Rimlawi wrote that he was recruited to start an outpatient OB/GYN service at The Hospital in Sidney, New York. According to Dr. Rimlawi, the private practitioners on staff at that hospital were threatened by this development and bad relations developed. At the end of his employment contract, he was offered an extension of the contract at a pay rate he could not agree to. Instead, Dr. Rimlawi reported that he joined the largest private practice group in Sidney, New York. Dr. Rimlawi stated that the hospital administrator felt betrayed by this move and one “way the administrator used to fight back against the physicians who opposed him was by reporting them to the New York State Board whenever the opportunity presented.” Dr. Rimlawi acknowledged that he had signed the New York Consent Agreement, but had done so even though he did not agree with the charges. Moreover, Dr. Rimlawi provided a detailed response to each of the charges. (Resp. Ex. A)
9. The New York Board’s factual allegations and Dr. Rimlawi’s responses are as follows:

Allegation 1: In providing medical care to Patient A on or about October 11, 1999, Dr. Rimlawi failed to adequately monitor Patient A and failed to deliver her baby in a timely manner.

Dr. Rimlawi explained that Patient A was 35 weeks pregnant, with a premature rupture of the membranes following an automobile accident. He stated that his admission orders included continuous fetal monitoring. Dr. Rimlawi noted that, once Patient A and the fetus stabilized, he returned to his home, two blocks away, for dinner. While there, Dr. Rimlawi stated that the nurses removed the fetal monitor to allow Patient A to go to the bathroom. When fetal monitoring resumed about 20 minutes later, the heart rate was allegedly noted to be in the 90s. Dr. Rimlawi contends that he called the hospital about that time and, upon learning of the situation, asked that Patient A be prepped for a caesarian section. He stated that he returned in six minutes, the nurses reported intermittent fetal heart rates with a portable Doppler unit and the nurses reported to him that the fetal heart rate was around 120 beats per minute on the way to the operating room. Dr. Rimlawi reported that he, however, found that the Doppler unit supposedly used by the nurses had a dead battery and, therefore, he tried to hear the fetal heart beat with the fetal monitor transducer before proceeding with the caesarian section. Dr. Rimlawi wrote that, although he was not able to hear a fetal heart beat, he chose to proceed with the caesarian section and, within 2 minutes, the baby was delivered stillborn. Dr. Rimlawi believes that the fetal heart beat was compromised, most likely, due to cord compression when Patient A went to the bathroom, although the nurses claim that the fetal heart beat was lost during the time that Dr. Rimlawi attempted to obtain the fetal heart rate in the operating room.

Additionally, Dr. Rimlawi explained that he left the operative field after the baby was delivered to resuscitate the baby because the pediatrician had not yet arrived. The surgical assistant completed the caesarian section. When he

returned to the operative field, the incision was already closed and covered by a dressing.

Allegation 2: Dr. Rimlawi provided medical care to Patient B from October 21, 1999, through on or about March 21, 2000. Subsequent to the delivery of Patient B's baby, Dr. Rimlawi failed to adequately and/or timely evaluate Patient B and/or failed to obtain timely consultation.

Dr. Rimlawi responded that this patient had an uneventful caesarian section and tubal ligation. The following day, she developed a cough with some wheezing and rhonchi in both lungs. Dr. Rimlawi stated that it is not unusual for smokers (which she was) to develop a cough and some rhonchi post anesthesia and surgery. Dr. Rimlawi wrote that, when her oxygen saturation level dropped, she was transferred to the intensive care unit and an internist became responsible for her pulmonary care. Dr. Rimlawi wrote that Patient B progressed to acute respiratory distress syndrome. Dr. Rimlawi contends that Patient B eventually stabilized, was discharged, and later seen by the internist. Dr. Rimlawi reported that, at that time, the internist referred her to a higher care center and she died five days later due to acute respiratory distress syndrome of unknown etiology. Dr. Rimlawi disagreed with what he considers the New York Board's allegation to be, namely, that he should have sought medical consultation one day earlier.

Allegation 3: Dr. Rimlawi provided medical care to Patient C from March 1996 through in or about November 1999. Dr. Rimlawi failed to obtain timely consultation with a surgeon in providing medical care to Patient C.

Dr. Rimlawi explained that Patient C had visited his office on November 9, 1999, for a prenatal visit and she had no complaints. However, Patient C went to the emergency room later that evening, complaining of epigastric pain. Dr. Rimlawi reported that he saw her the next day and he felt there was no change in her condition and surgery was not indicated. Two days later, she was readmitted to the emergency room at which time a surgical consult took place and a cholecystectomy was done. Dr. Rimlawi disagrees that a surgical consult was needed on November 9, 1999.

Allegation 4: Dr. Rimlawi provided medical care to Patient D from about May 12, 2000, through in or about June 2000. Dr. Rimlawi performed a non-emergent diagnostic laparoscopy on Patient D without adequate consent from Patient D.

Dr. Rimlawi explained that he had spoken with Patient D about a laparoscopy and she orally consented to the procedure. He alleges that his office proceeded with the insurance paperwork and referred her for a surgical consultation for her gall bladder disease. According to Dr. Rimlawi, the surgeon scheduled her for surgery the next morning and asked Dr. Rimlawi to be the surgical assistant. Dr. Rimlawi intended to conduct the laparoscopy at the same time and planned

to meet with Patient D the morning of the surgery. Dr. Rimlawi claims that Patient D's surgery time was moved up and, by the time he arrived at the hospital, Patient D was already heavily sedated. Dr. Rimlawi stated that, in light of her oral consent, having set up the insurance, and the fact that he knew her very well, he felt that he had adequate consent for the laparoscopy.

Allegation 5: In providing medical care to Patient E on or about May 28, 1999, Dr. Rimlawi, while using a syringe on Patient E, stuck himself with the needle and continued to use the same needle and syringe to inject Patient E.

Dr. Rimlawi denies that he continued to use the same needle on Patient E after he stuck himself with the needle. He stated that the nurse who made this allegation was one of the nurses with whom he had conflict.

Allegation 6: After attempting to deliver Patient F's baby using a vacuum extractor on or about August 29, 1996, Dr. Rimlawi threw and/or dropped and/or put the vacuum extractor on the floor. Dr. Rimlawi then used the same vacuum extractor again after it had been on the floor.

Dr. Rimlawi denies that this allegation occurred and claims that this allegation was made by the nurses.

Allegation 7: After attempting to deliver Patient G's baby using a vacuum extractor on or about August 2, 1998, Dr. Rimlawi threw and/or dropped and/or put the vacuum extractor on the floor. Dr. Rimlawi then used the same vacuum extractor again after it had been on the floor.

Dr. Rimlawi denies that this allegation occurred and claims that this allegation was made by a nurse.

Allegation 8: Dr. Rimlawi prescribed medications to Patient H, including Roxicet, Tylenol with Codeine, Buspar, Percocet, and Darvocet. On various occasions, Dr. Rimlawi prescribed medications to Patient H: (a) without performing and/or documenting a physical examination, (b) without taking and/or documenting any history (c) without adequate medical justification; and (d) without medical justification because of his personal and/or professional relationship with Patient H. Dr. Rimlawi permitted Patient H to have another prescription for Darvocet on May 28, 2000, despite his alleged reluctance to prescribe Darvocet on April 28, 2000. Also, Dr. Rimlawi offered money to Patient H if she would spend time with him outside the hospital.

Dr. Rimlawi stated that, in order to relieve Patient H's migraine pain, he did provide her with several prescriptions on weekends when his private practice office was not open. He admitted that he had neglected to include them in her patient chart. He further explained that, after referring her to a neurologist, he

became concerned that she was addicted to controlled substances and became reluctant to provide any further refills. Dr. Rimlawi wrote that Patient H then became upset. Additionally, Dr. Rimlawi stated that he had offered her a job in his private practice and told her that, if she accepted, she would deserve a bonus every year.

(St. Ex. 2 at 9-11; Resp. Ex. A at 2-8)

Letters of Recommendation and Appreciation

10. Dr. Rimlawi presented two letters of recommendation and four letters of appreciation from two doctors who are familiar with him and his practice of medicine. The State did not have the opportunity to cross-examine the doctors.
11. Francesco Porcarelli, M.D., F.A.C.O.G., wrote two letters in September 1999, recommending Dr. Rimlawi for a program in the United Kingdom. Dr. Porcarelli was the Medical Director at The Hospital in Sidney, New York at that time. Dr. Porcarelli stated that Dr. Rimlawi “is conscientious, hard working, and a very responsible colleague. * * * Dr. Rimlawi is a capable obstetrician and competent gynecologic surgeon.” (Resp. Ex. C at 1-2)
12. Gerald C. Kempthorne, M.D., wrote four letters to Dr. Rimlawi in 1989, 1990 and 1992. Dr. Kempthorne was the Medical Director at HMO of Wisconsin Insurance Corporation and the Medical Director at Community Physicians’ Network, Inc., at those times. In the letters, he thanked Dr. Rimlawi for his efforts as a participant in the Quality Assurance Committee of the Community Physicians’ Network, Inc. In particular, Dr. Kempthorne stated that it “is very important for me to convey to you that not only are you committed to help make our program even better, you have a very special talent in objective and critical review of obstetrical and gynecologic cases. In the cases you presented the other evening we were all very impressed with your incisive, objective and careful analyses of all of them.” (Resp. Ex. C at 5-8)

FINDINGS OF FACT

1. On May 18, 2006, the New York Board issued a Consent Order in which it approved a Consent Agreement with Bassem Mehrim Rimlawi, M.D. The New York Board subjected his license to practice medicine in the state of New York to permanent restrictions, including restrictions from practicing obstetrics, restrictions from prescribing or dispensing any controlled substances, and the surrender of his DEA controlled substance certificate, and it imposed certain probationary terms for a period of three years. The New York Board took this action upon the allegations that Dr. Rimlawi’s conduct in treating eight patients between August 1996 and June 2000, amounted to professional misconduct by: “practicing medicine with negligence on more than one occasion,” “practicing medicine with incompetence on more than one occasion,” “failing to use scientifically accepted barrier precautions and infection control practices,” and “performing professional services [that had]

not been duly authorized by the patient,” in violation of New York Education Law §§6530(3), 6530(5), 6530(47) and 6530(26). Dr. Rimlawi did not contest the allegations.

2. Dr. Rimlawi’s Ohio certificate expired in April 2004.

CONCLUSION OF LAW

The New York Board action against Bassem Mehrim Rimlawi, M.D., as set forth in Finding of Fact 1, 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 language is used in Section 4731.22(B)(22), Ohio Revised Code.

* * * * *

Even though Dr. Rimlawi does not currently practice in Ohio, says he does not intend to practice in Ohio in the future, and his Ohio certificate expired in 2004, this Board has jurisdiction to take disciplinary action against Dr. Rimlawi because he has held an Ohio certificate. Section 4731.22(M)(3), Ohio Revised Code, states that “[f]ailure by an individual to renew a certificate of registration in accordance with this chapter shall not remove or limit the board’s jurisdiction to take any disciplinary action under this section against the individual.”

Given his current situation, Dr. Rimlawi suggests that any discipline by this Board be deferred until he seeks licensure in Ohio. However, it is unclear when Dr. Rimlawi may seek to restore his Ohio certificate and, thus, any deferral could open the Board to an argument of unconstitutional or improper delay of discipline, or another similar argument. Inasmuch as the Board has thus far pursued the allegations listed in the July 12, 2006, letter, the Hearing Examiner concludes that disciplinary action should be determined at this time and not be deferred.

While Dr. Rimlawi provided this Board with responses to the New York allegations, he chose not to contest the allegations raised by the New York Board and he agreed to discipline by that state regulatory agency. Moreover, the record reflects that Dr. Rimlawi practiced for many years as an obstetrician/gynecologist and, in 2006, he voluntarily agreed on a permanent basis to: not practice obstetrics in New York, not prescribe or dispense any controlled substances, and surrender his DEA controlled substance certificate. Although the record is not clear whether Dr. Rimlawi is currently practicing medicine, the record indicates that he has not practiced medicine in the United States since 2002.

The allegations against Dr. Rimlawi in New York and the agreed-upon discipline in that state are very serious. Because Dr. Rimlawi’s Ohio certificate expired more than two years ago and some disciplinary options are not applicable in this matter, the Hearing Examiner first finds that Dr.

Rimlawi should be reprimanded. In addition, in the event that Dr. Rimlawi does seek an Ohio certificate in the future, he should fulfill several conditions before that certificate is restored. Those conditions include: demonstration of compliance with the New York Board Consent Order; demonstration of unrestricted licensure in other jurisdictions where he holds medical licensure; successful completion of the Special Purpose Examination [SPEX] of the Federation of State Medical Boards or similar examination; submission to an assessment and evaluation by the Post-Licensure Assessment System sponsored by the Federation of State Medical Boards and the National Board of Medical Examiners or another competency assessment program approved by the Board; and successful completion of the educational activities as recommended in an approved learning plan. Moreover, upon restoration of an Ohio certificate, it should be subject to probationary terms for a period of at least three years, including a requirement for a practice plan overseen by a monitoring physician who will evaluate Dr. Rimlawi, his practice, and his patient charts. Finally, after completion of the probationary terms, Dr. Rimlawi's Ohio certificate should be permanently limited and restricted such that: (a) Dr. Rimlawi shall not practice obstetrics, including but not limited to prenatal care, care of patients in labor and delivery, and postpartum care; and (b) Dr. Rimlawi shall not prescribe or dispense any controlled substances.

PROPOSED ORDER

It is hereby ORDERED that:

- A. **REPRIMAND:** Bassem Mehrim Rimlawi, M.D., is REPRIMANDED.
- B. **CONDITIONS FOR RESTORATION:** Following Dr. Rimlawi's submission of an application for restoration, accompanied by appropriate fees if any, the Board shall not consider restoration of Dr. Rimlawi's expired certificate to practice medicine and surgery until all of the following conditions have been met:
 1. **Certification of Compliance with the May 18, 2006, Consent Order of the New York Board:** At the time he submits his application for restoration, Dr. Rimlawi shall submit to the Board certification from the New York State Board for Professional Medical Conduct [New York Board], dated no earlier than sixty days prior to Dr. Rimlawi's application for restoration, that Dr. Rimlawi has maintained full compliance with the May 18, 2006, Consent Order of the New York Board.
 2. **Evidence of Unrestricted Licensure in Other States, Besides New York, and in Other Countries:** At the time he submits his application for restoration, Dr. Rimlawi shall provide written documentation acceptable to the Board verifying that Dr. Rimlawi otherwise holds a full and unrestricted license to practice medicine and surgery in all other states (besides New York) and in all other countries in which he is licensed at the time of application or has been in the past licensed, or that he would be entitled to such license but for the non-payment of renewal fees.

3. **Special Purpose Examination [SPEX]**: Prior to submitting his application for restoration, Dr. Rimlawi shall take and pass the SPEX of the Federation of State Medical Boards or any similar written examination which the Board may deem appropriate to assess Dr. Rimlawi's clinical competency.
4. **Post-Licensure Competency Assessment Program [CAP]**: At the time he submits his application for restoration, Dr. Rimlawi shall submit a Learning Plan developed for Dr. Rimlawi by the Post-Licensure Assessment System sponsored by the Federation of State Medical Boards and the National Board of Medical Examiners, or another CAP approved in advance by the Board. The CAP Learning Plan shall have been developed subsequent to the issuance of a written Assessment Report, based on an assessment and evaluation of Dr. Rimlawi by the CAP approved by the Board.
 - a. Prior to the initial assessment by the CAP, Dr. Rimlawi shall furnish the CAP copies of the Board's Order, including the Summary of the Evidence, Findings of Fact, and Conclusions of Law, and any other documentation from the hearing record which the Board may deem appropriate or helpful to that assessment.
 - b. Dr. Rimlawi shall assure that, within ten days of its completion, the written Assessment Report compiled by the CAP is submitted to the Board. Moreover, Dr. Rimlawi shall ensure that the written Assessment Report includes the following:
 - A detailed plan of recommended practice limitations, if any;
 - Any recommended education;
 - Any recommended mentorship or preceptorship;
 - Any reports upon which the recommendation is based, including reports of physical examination and psychological or other testing.
 - c. Any CAP Learning Plan developed for Dr. Rimlawi shall be subject to Board review and approval prior to its implementation. The Board shall have the right to amend, supplement, or otherwise modify the CAP Learning Plan.
 - d. Dr. Rimlawi shall successfully complete the educational activities in the Approved Learning Plan, including any final assessment or evaluation.

Upon successful completion of the educational activities, including any final assessment or evaluation, Dr. Rimlawi shall provide the Board with satisfactory documentation from the CAP indicating that Dr. Rimlawi has successfully completed the Approved Learning Plan's educational activities.
 - e. Dr. Rimlawi's participation in the CAP shall be at his own expense.

5. **Additional Evidence of Fitness To Resume Practice:** In the event that Dr. Rimlawi has not been engaged in the active practice of medicine and surgery for a period in excess of two years prior to application for restoration, the Board may require additional evidence of his fitness to resume practice.
- C. **PROBATION:** Upon restoration, Dr. Rimlawi's certificate shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least three years:
1. **Obey the Law:** Dr. Rimlawi shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in the state or country in which he is practicing.
 2. **Declarations of Compliance:** Dr. Rimlawi shall submit quarterly declarations under penalty of Board disciplinary action or criminal prosecution, stating whether there has been compliance with all the conditions of this Order. The first quarterly declaration must be received in the Board's offices on or before the first day of the third month following the month in which Dr. Rimlawi's certificate is restored. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.
 3. **Personal Appearances:** Dr. Rimlawi shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which Dr. Rimlawi's certificate is restored, or as otherwise directed by the Board. Subsequent personal appearances must occur every three months thereafter, and/or as otherwise requested by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.
 4. **Post-Licensure Competency Assessment Program [CAP]:** Dr. Rimlawi shall practice in accordance with the Board-Approved Learning Plan, unless otherwise determined by the Board. Dr. Rimlawi shall cause to be submitted to the Board quarterly declarations from the CAP documenting Dr. Rimlawi's continued compliance with the Approved Learning Plan.

Dr. Rimlawi shall obtain the Board's prior approval for any deviation from the Approved Learning Plan.

If, without permission from the Board, Dr. Rimlawi fails to comply with the Approved Learning Plan, Dr. Rimlawi shall cease practicing medicine and surgery beginning the day following Dr. Rimlawi's receipt of notice from the Board of such violation and shall refrain from practicing until the CAP provides written notification to the Board that Dr. Rimlawi has reestablished compliance with the Approved Learning Plan. Practice during the period of noncompliance shall be considered unlicensed practice in violation of Section 4731.41, Ohio Revised Code.

5. **Practice Plan:** Within thirty days of the date of the restoration of Dr. Rimlawi's certificate, and prior to Dr. Rimlawi's commencement of practice in Ohio, or as otherwise determined by the Board, Dr. Rimlawi shall submit to the Board and receive its approval for a plan of practice in Ohio. The practice plan, unless otherwise determined by the Board, shall be limited to a supervised structured environment in which Dr. Rimlawi's activities will be directly supervised and overseen by a monitoring physician approved by the Board. Dr. Rimlawi shall obtain the Board's prior approval for any alternation to the practice plan approved pursuant to this Order.

At the time Dr. Rimlawi submits his practice plan, he shall also submit the name and curriculum vitae of a monitoring physician for prior written approval by the Secretary or Supervising Member of the Board. In approving an individual to serve in this capacity, the Secretary and Supervising Member will give preference to a physician who practices in the same locale as Dr. Rimlawi and who is engaged in the same or similar practice specialty.

The monitoring physician shall monitor Dr. Rimlawi and his medical practice, and shall review Dr. Rimlawi's patient charts. The chart review may be done on a random basis, with the frequency and number of charts reviewed to be determined by the Board.

Further, the monitoring physician shall provide the Board with reports on the monitoring of Dr. Rimlawi and his medical practice, and on the review of Dr. Rimlawi's patient charts. Dr. Rimlawi shall ensure that the reports are forwarded to the Board on a quarterly basis and are received in the Board's offices no later than the due date for Dr. Rimlawi's quarterly declaration.

In the event that the designated monitoring physician becomes unable or unwilling to serve in this capacity, Dr. Rimlawi must immediately so notify the Board in writing. In addition, Dr. Rimlawi shall make arrangements acceptable to the Board for another monitoring physician within thirty days after the previously designated monitoring physician becomes unable or unwilling to serve, unless otherwise determined by the Board. Furthermore, Dr. Rimlawi shall ensure that the previously designated monitoring physician also notifies the Board directly of his or her inability to continue to serve and the reasons therefore.

6. **Absence from Ohio:** In the event that Dr. Rimlawi should leave Ohio for three continuous months, or reside or practice outside the State, Dr. Rimlawi must notify the Board in writing of the dates of departure and return. Periods of time spent outside Ohio will not apply to the reduction of the probationary period under this Order, unless otherwise determined by the Board in instances where the Board can be assured that probationary monitoring is otherwise being performed.

7. **Noncompliance Will Not Reduce Probationary Period:** In the event Dr. Rimlawi is found by the Secretary of the Board to have failed to comply with any provision of this Order, and is so notified of that deficiency in writing, such period(s) of noncompliance will not apply to the reduction of the probationary period under this Order.

D. **TERMINATION OF PROBATION AND PERMANENT LIMITATIONS AND RESTRICTIONS:** Upon successful completion of probation, as evidenced by a written release from the Board, Dr. Rimlawi's certificate will be restored but shall thereafter be permanently LIMITED and RESTRICTED as follows:

1. Dr. Rimlawi shall not practice obstetrics, including but not limited to prenatal care, care of patients in labor and delivery, and postpartum care.
2. Dr. Rimlawi shall not prescribe or dispense any controlled substances.

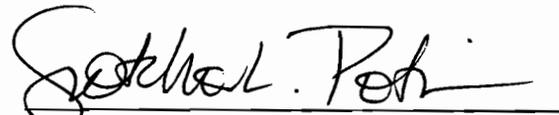
E. **VIOLATION OF THE TERMS OF THIS ORDER:** If Dr. Rimlawi violates the terms of this Order in any respect, the Board, after giving him notice and the opportunity to be heard, may institute whatever disciplinary action it deems appropriate, up to and including the permanent revocation of his certificate.

F. **REQUIRED REPORTING TO EMPLOYERS AND HOSPITALS:** Within thirty days of the effective date of this Order, or as otherwise determined by the Board, Dr. Rimlawi shall provide a copy of this Order 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. Rimlawi shall provide a copy of this Order 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 until Dr. Rimlawi receives from the Board written notification of his successful completion of probation.

G. **REQUIRED REPORTING TO OTHER LICENSING AUTHORITIES:** Within thirty days of the effective date of this Order, or as otherwise determined by the Board, Dr. Rimlawi shall provide a copy of this Order 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. Rimlawi shall also provide a copy of this Order by certified mail, return receipt requested, at the time of application to the proper licensing authority of any state or jurisdiction in which he applies for any professional license or reinstatement or restoration of any professional license. Further, Dr. Rimlawi shall provide this Board with a copy of the return receipt as proof of notification within thirty days of receiving that return receipt, unless otherwise determined by the Board. This requirement shall continue until Dr. Rimlawi receives from the Board written notification of his successful completion of probation.

Report and Recommendation
In the Matter of Bassem Mehrim Rimlawi, M.D.
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This Order shall become effective immediately upon the mailing of notification of approval by the Board.


Gretchen L. Petrucci
Hearing Examiner



State Medical Board of Ohio

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EXCERPTS FROM THE DRAFT MINUTES OF MAY 9 & 10, 2007

REPORTS AND RECOMMENDATIONS

Dr. Kumar announced that the Board would now consider the Reports and Recommendations appearing on its agenda. He asked whether each member of the Board had received, read, and considered the hearing records, the proposed findings, conclusions, and orders, and any objections filed in the matters of: Iman Michel Bastawros, M.D.; Patrick B. Senatus, M.D.; Michael Gregory Strayer; and Bassem Mehrim Rimlawi, M.D. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Amato	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye
	Dr. Kumar	- aye

Dr. Kumar asked whether each member of the Board understands that the disciplinary guidelines do not limit any sanction to be imposed, and that the range of sanctions available in each matter runs from dismissal to permanent revocation. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Amato	- aye
	Dr. Robbins	- aye

Dr. Steinbergh - aye
Dr. Kumar - aye

Dr. Kumar noted that, in accordance with the provision in Section 4731.22(F)(2), Revised Code, specifying that no member of the Board who supervises the investigation of a case shall participate in further adjudication of the case, the Secretary and Supervising Member must abstain from further participation in the adjudication of these matters. They may, however, participate in the matters of Dr. Bastawros and Dr. Senatus, as those cases are not disciplinary in nature and concern only the doctors' qualifications for licensure. In the matters before the Board today, Dr. Talmage served as Secretary and Mr. Albert served as Supervising Member.

The original Reports and Recommendations shall be maintained in the exhibits section of this Journal.

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Dr. Kumar advised that, at Dr. Rimlawi's request, the Board will consider the matter of Bassem Mehrim Rimlawi, M.D. at the beginning of the May 10, 2007 session of the Board.

.....

BASSEM MEHRIM RIMLAWI, M.D.

Dr. Kumar reminded the Board that the members who supervised the investigation of this matter may not participate in the adjudication. He advised that Dr. Talmage and Mr. Albert, the Secretary and Supervising Member, must abstain in this matter.

Dr. Kumar directed the Board's attention to the matter of Bassem M. Rimlawi, M.D. He advised that no objections were filed to Hearing Examiner Petrucci's Report and Recommendation.

Dr. Kumar continued that a request to address the Board has been timely filed on behalf of Dr. Rimlawi. Five minutes would be allowed for that address.

Mr. Plinke at this time reviewed Dr. Rimlawi's educational background and work history in both Saida, Lebanon, and in the United States. He noted that, in 2002, Dr. Rimlawi returned to Lebanon for family reasons, after practicing in New York for several years. In 2006, ten years after he had been recruited for the New York position, and five years after he left to return to Lebanon, the State of New York made allegations against Dr. Rimlawi. The Board has those allegations before it today. Mr. Plinke stated that Dr. Rimlawi was not in a position where he could really defend the New York allegations. The hospital had closed and many of the witnesses and resources that he would have needed to fully defend the charges were unavailable, and Dr. Rimlawi was in Lebanon and not in a position to come back and defend himself. Dr. Rimlawi settled the case by pleading no contest and agreeing to the conditions that New York had proposed.

Mr. Plinke stated that Dr. Rimlawi actually does not have an Ohio license. He does not plan, at this point, to pursue one in the future. Mr. Plinke suggested that the Board defer the restoration terms in the Proposed Order until Dr. Rimlawi reapplies for Ohio licensure. Mr. Plinke stated that, were Dr. Rimlawi to practice in another state for four or five years, he may take actions as far as practice assessment or otherwise, that might be relevant to the Board should he reapply in Ohio in the future. Mr. Plinke suggested that the Board give itself the option to address those types of assessments and take them into consideration if Dr. Rimlawi were to seek licensure in Ohio in the future.

Dr. Rimlawi thanked the Board members for allowing him to speak this morning and for accommodating his travel arrangements. He stated that he is here as a result of a settlement with New York that was made after he left New York in December 2001. Dr. Rimlawi stated that, during that time, he was living in his home country of Lebanon. He settled this matter without making any admissions because he just could not come back to defend it. The New York matter centered on practice that happened in the late 1990s and in 2000. Dr. Rimlawi stated that he doesn't know why New York State waited six years to charge him with whatever they thought he didn't do right.

Dr. Rimlawi stated that he believes that he had a defense to many of the allegations; however, there were too many things going on in his life to do so in a practical sense. On top of that, even had he been in the United States, the facility in which the alleged events occurred was closed and most of his colleagues relocated.

Dr. Rimlawi stated that, after seeing first-hand the impact of the settlement he made with the New York Board, he certainly regrets not doing more to rebut and defend those charges. He failed to fully anticipate the impact that the New York settlement would have on him in regard to other states, such as Ohio, where he doesn't even have a license.

Dr. Rimlawi stated that he hopes that the Board will consider that these allegations are not reflections of his ability to practice. If he'd practiced like this for twenty years, he would have had more than a complaint or malpractice suit.

Dr. Rimlawi stated that he moved back to Lebanon for family reasons. The country is not in good shape now. He has lost his position at a teaching hospital and university there because of the dire financial circumstances of the country. There is mass unemployment, and now the practice of medicine has become a volunteer and charitable activity. Dr. Rimlawi stated that he has adult children living in the United States, and he has been looking for positions near them. He has no contacts in Ohio, and he really doesn't plan to seek a license here in the future; however, the Proposed Order will have an impact on his efforts elsewhere. While he doesn't fully understand what is entailed in the assessment, it appears to be more than New York imposed. The decisions that Ohio made were worse than what New York ordered. It appears to be more than what New York has done. Dr. Rimlawi stated that he might be wrong in that, but, nevertheless, he believes that the Ohio Board's Order will make it difficult to explain why Ohio is doing more than New York did.

Dr. Rimlawi stated that he appreciates the Board's time in seeing him this morning, and he asked that the Board consider some alternative to the Proposed Order.

Dr. Kumar asked whether the Assistant Attorney General wished to respond.

Mr. Clifford stated that he just wants to highlight a couple of things. The New York Board restricted Dr. Rimlawi's license permanently by not permitting him to practice obstetrics, restricting him from prescribing or dispensing any controlled substances, requiring him to surrender his DEA controlled substance certificate, and imposing certain probationary terms for three years. New York alleged that Dr. Rimlawi's conduct included: practicing medicine with negligence on more than one occasion; practicing medicine with incompetence on more than one occasion; failing to use scientifically accepted barrier precautions in infection control practices; and performing professional services that had not been authorized by the patient.

Mr. Clifford stated that the Board's decision to do something different from what another Board did is immaterial. This is a (B)(22) action. The Board is looking at the action by the New York Board, what they did, and not necessarily the standard-of-care issues that were present. The Board isn't here to try those again. This is simply that New York took an action and did certain things. Ohio is permitted to make its own decision on whatever penalty it deems appropriate.

DR. VARYANI MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF BASSEM MEHRIM RIMLAWI, M.D. DR. ROBBINS SECONDED THE MOTION.

Dr. Kumar stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that this was a minimal standards case for OB/GYN practice in New York. This is a "bootstrap" of the New York consent agreement that was signed in 2006. This is not a case this Board can retry; it's a bootstrap action. Dr. Steinbergh stated that she would say that the Proposed Order is a minimal type of action that the Board would take in a case like this. The Board could simply revoke Dr. Rimlawi's license and not expect anything else. If Dr. Rimlawi ever wanted to come back to Ohio, he would simply have to apply and prove that he's appropriate.

Dr. Steinbergh stated that she has one question concerning the Proposed Order, and that is regarding the language on page 8 of the Report and Recommendation. She asked for clarification of the opening statement in the last paragraph on the page, which reads as follows:

The allegations against Dr. Rimlawi in New York and the agreed-upon discipline in that state are very serious. Because Dr. Rimlawi's Ohio certificate expired more than two years ago and some disciplinary options are not applicable in this matter...

Dr. Steinbergh stated that she wants to know what is not applicable.

Dr. Kumar stated that he understands that to mean that Dr. Rimlawi doesn't have an existing license to revoke.

Ms. Pfeiffer stated that she believes that, under the statute, the Board still has the authority to revoke Dr. Rimlawi's license. The Board can revoke the license, but it can't suspend his license because he currently doesn't have an active license to suspend.

Ms. Marshall explained that the Board has authority over a full license forever once a license has been issued. The Board can't suspend the license in this case, because his license is inactive; however, the Board can still reprimand Dr. Rimlawi and can still revoke his license.

Dr. Steinbergh stated that her feelings in this case are that the Board could either go with the Proposed Order, which she finds appropriate, but lean. She stated that she would do more than a reprimand. She would consider simple revocation of this license.

Dr. Buchan stated that his reading of this case was fairly matter of fact. The Board is simply responding to an order out of New York, and he doesn't see options other than what Dr. Steinbergh has noted.

Dr. Buchan stated that he thinks that the Order, as written, is appropriate. It gives Dr. Rimlawi an opportunity, but, by the same token, it protects the citizens appropriately. If he abides by the Proposed Order, there is some possibility of Dr. Rimlawi's coming back.

Dr. Buchan commented that he's interested in the revocation suggestion because, quite honestly, he thinks that the allegations are quite serious. He'd be interested in revocation, if other Board members agree. Otherwise, he's prepared to vote on the Proposed Order, as written.

Dr. Egner stated that, for a bootstrap case, the Board has a fair amount of information here. She stated that she agrees with the Proposed Order, and she agrees with Dr. Steinbergh in that, had this case been the Board's own minimal standards case, it would probably end up with a more restrictive order. Dr. Egner stated that she can go along with the Proposed Order. She stated that she doesn't know how she feels about revocation versus reprimand with limitations on it. She stated that she doesn't have strong feelings one way or the other.

Dr. Steinbergh stated that she doesn't have strong feelings one way or the other, either; but they were serious allegations, and he did sign the consent agreement. In her mind, a reprimand is a minimal message where, in a case like this, she doesn't know that it changes anything in terms of his ability to come back. He has to prove competence one way or another. This does outline for him what he needs to do. Given the fact that the Board can't suspend this license, it has to be reprimand or revocation.

Dr. Buchan stated that, as he thinks through this, because he did not offer testimony in rebuttal, he thinks the Proposed Order, as written is appropriate.

Dr. Kumar stated that he would personally like to make two quick comments. He stated that there is a little redundancy in the Proposed Order. He referred to paragraphs (B)(3) and (B)(5). He stated that (B)(3) requires Dr. Rimlawi to pass the SPEX, while (B)(5) essentially does the same thing, advising that the Board may require him to submit additional evidence of fitness to practice. Dr. Kumar stated that the Board usually interprets that to mean that he must pass the SPEX.

Dr. Kumar stated that another thing he was questioning was what purpose a reprimand would serve. He suggested that the Board simply state that the license be restricted as follows, and then start the conditions for restoration. He stated that he's not sure what a reprimand really does here.

Dr. Robbins stated that he feels that, at the very least, the Board should reprimand. He thinks that the actions were severe. The Board isn't here to try the case, but Dr. Rimlawi didn't contest the actions in New York. His sense is that, at the very least, a reprimand is warranted.

Dr. Kumar stated that that's fine, and asked about the cleaning up by combining paragraphs (3) and (5).

Board members indicated that they didn't have a problem with that.

Dr. Steinbergh stated that she doesn't have a problem with deleting paragraph (B)(3), noting that paragraph (B)(5) allows the Board flexibility to require anything it deems appropriate, whether it be testing or anything else.

DR. STEINBERGH MOVED TO DELETE PARAGRAPH (B)(3), THE SPEX REQUIREMENT, FROM THE PROPOSED ORDER. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Amato	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye

The motion carried.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF BASSEM MEHRIM RIMLAWI, M.D. DR. ROBBINS SECONDED THE MOTION.

Dr. Kumar stated that he would now entertain further discussion in the above matter.

There were no further comments made by Board members.

A vote was taken on Dr. Steinbergh's motion to approve and confirm, as amended.:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Amato	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye

The motion carried.



State Medical Board of Ohio

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

July 12, 2006

Bassem Mehrim Rimlawi, M.D.
600 Circle Drive
Apt. 5
Sidney, NY 13838

Dear Doctor Rimlawi:

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, which is inactive for non-renewal, or to reprimand you or place you on probation for one or more of the following reasons:

- (1) On or about May 18, 2006, the New York State Board for Professional Medical Conduct entered a Consent Order [New York Consent Order] which, *inter alia*, subjected your license to practice medicine in the state of New York to permanent restrictions, including restrictions from practicing obstetrics and from prescribing or dispensing any controlled substances. In addition, the New York Consent Order imposed certain probationary terms for a period of three years. A copy of the New York Consent Order is attached hereto and incorporated herein.

The New York 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.

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.

Mailed 7-13-06

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 4331 8611
RETURN RECEIPT REQUESTED

Duplicate mailing to: Riyadh Solh Street
Audi Bank Building
Saida, Lebanon

REGISTERED MAIL # RR 323 470 249 US
RETURN RECEIPT REQUESTED



New York State Board for Professional Medical Conduct

433 River Street, Suite 303 • Troy, New York 12180-2299 • (518) 402-0863

Antonia C. Novello, M.D., M.P.H., Dr. P.H.
Commissioner
NYS Department of Health

Dennis P. Whalen
Executive Deputy Commissioner
NYS Department of Health

Dennis J. Graziano, Director
Office of Professional Medical Conduct

Public

Kendrick A. Sears, M.D.
Chairman

Michael A. Gonzalez, R.P.A.
Vice Chair

Ansel R. Marks, M.D., J.D.
Executive Secretary

May 19, 2006

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Bassem Rimlawi, M.D.
c/o Frederick C. Riester, Esq.
9 Thurlow Terrace
Albany, NY 12203

Re: License No. 130574

Dear Dr. Rimlawi:

Enclosed is a copy of Order #BPMC 06-114 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect May 26, 2006.

If the penalty imposed by this Order is a surrender, revocation or suspension, you are required to deliver your license and registration within five (5) days of receipt of this Order to the Board for Professional Medical Conduct, New York State Department of Health, Hedley Park Place, Suite 303, 433 River Street, Troy, New York 12180.

Sincerely,

Ansel R. Marks, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Frederick C. Riester, Esq.
Iseman, Cunningham, Riester & Hyde
9 Thurlow Terrace
Albany, NY 12203

OHIO STATE MEDICAL BOARD

JUN 27 2006

IN THE MATTER
OF
BASSEM RIMLAWI, M.D.

CONSENT
ORDER

BPMC No. #06-114

Upon the application of Bassem Rimlawi, M.D. in the attached Consent Agreement and Order, which is made a part of this Consent Order, it is

ORDERED, that the Consent Agreement, and its terms, are adopted and it is further

ORDERED, that this Order shall be effective upon issuance by the Board, either:

- by mailing of a copy of this Consent Order, either by first class mail to Respondent at the address in the attached Consent Agreement or by certified mail to Respondent's attorney, OR
- upon facsimile transmission to Respondent or Respondent's attorney, whichever is first.

OHIO STATE MEDICAL BOARD

SO ORDERED.

JUN 27 2006

DATE: 5/18/06



KENDRICK A. SEARS, M.D.
Chair
State Board for Professional Medical Conduct

NEW YORK STATE DEPARTMENT OF HEALTH
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER
OF
BASSEM RIMLAWI, M.D.

CONSENT
AGREEMENT
AND
ORDER

Bassem Rimlawi, M.D., representing that all of the following statements are true, deposes and says:

That on or about April 22, 1977, I was licensed to practice as a physician in the State of New York, and issued License No. 130574 by the New York State Education Department.

My current address is Riyad Solh Street, Audi Bank Building, Saida, Lebanon, and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

I understand that the New York State Board for Professional Medical Conduct has charged me with four specifications of professional misconduct.

A copy of the Statement of Charges, marked as Exhibit A, is attached to and part of this Consent Agreement.

I do not contest the Factual Allegations in Exhibit A, in full satisfaction of the charges against me, and agree to the following penalty:

My license to practice medicine in New York State shall be permanently restricted as follows:

- 1) I shall not practice obstetrics, including but not limited to prenatal care, care of patients in labor and in delivery, and postpartum care.

2) I will not prescribe or dispense any controlled substance. Within thirty (30) days of the effective date of this Order, I will advise the Drug Enforcement Agency (DEA) in writing of this licensure action against me by the New York State Board for Professional Medical Conduct, and I will surrender my DEA controlled substance certificate, privileges, and any DEA U.S. Official Order forms Schedules 1 and 2, to the DEA.

I further agree that the Consent Order shall impose the following conditions:

3) Pursuant to §230-a(9) of the Public Health Law, I shall be placed on probation for a period of three years, subject to the terms set forth in Exhibit B.

I stipulate that my failure to comply with any condition of this Order shall constitute misconduct as defined by New York State Education Law §6530(29).

I agree that if I am charged with professional misconduct in the future, this Consent Agreement and Order shall be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to the Public Health Law.

I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that this

Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent Order by first class mail to me at the address in this Consent Agreement, or to my attorney by certified mail, OR upon facsimile transmission to me or my attorney, whichever is first. The Order, this agreement, and all attached Exhibits shall be public documents, with only patient identities, if any, redacted.

I stipulate that the proposed sanction and Order are authorized by Public Health Law Sections 230 and 230-a and that the Board for Professional Medical Conduct and the Office of Professional Medical Conduct have the requisite powers to carry out all included terms. I ask the Board to adopt this Consent Agreement of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's adoption of this Consent Agreement, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the Consent Order for which I apply, whether administratively or judicially, I agree to be bound by the Consent Order, and ask that the Board adopt this Consent Agreement.

I am aware and agree that regardless of prior communication, the attorney for the Department, the Director of the Office of Professional Medical Conduct, and the Chairperson of the State Board for Professional Medical Conduct each reserve full discretion to enter into the agreement which I propose and this application which I submit, or to decline to do so.

DATED 4/8/2006

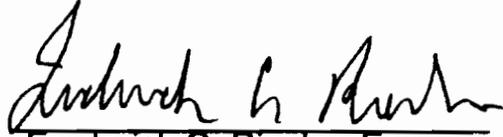

Bassem Rimlawi, M.D.
RESPONDENT

OHIO STATE MEDICAL BOARD

JUN 27 2006

The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions.

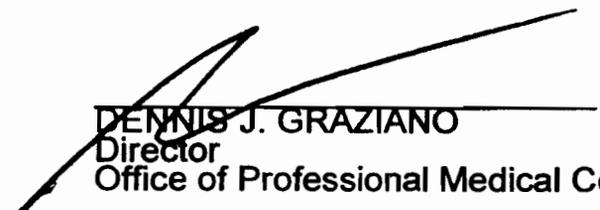
DATE: May 3, 2006


Frederick C. Riestler, Esq.
Attorney for Respondent

DATE: May 4, 2006


Cindy Marie Fascia, Esq.
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 17 May 2006


DENNIS J. GRAZIANO
Director
Office of Professional Medical Conduct

OHIO STATE MEDICAL BOARD

JUN 27 2006

IN THE MATTER
OF
BASSEM RIMLAWI, M.D.

STATEMENT
OF
CHARGES

Bassem Rimlawi, M.D., Respondent, was authorized to practice medicine in New York State on or about April 22, 1977, by the issuance of license number 130574 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. Respondent, on or about October 11, 1999, provided medical care to Patient A at The Hospital in Sidney, New York
1. Respondent failed to adequately monitor Patient A.
 2. Respondent failed to deliver Patient A's baby in a timely manner.
- B. Respondent provided medical care to Patient B at his office and at The Hospital in Sidney, New York on various occasions from on or about October 21, 1999, through on or about March 21, 2000.
1. Respondent, subsequent to Patient B's delivery, failed to adequately and/or timely evaluate Patient B and/or failed to obtain timely consultation.
- C. Respondent provided medical care to Patient C at his office and at The Hospital in Sidney, New York on various occasions from on or about March 1996, through on or about November 1999.
1. Respondent failed to obtain timely consultation with a surgeon.

EXHIBIT A

OHIO STATE MEDICAL BOARD

JUN 27 2006

- D. Respondent provided medical care to Patient D at his office and at The Hospital in Sidney, New York on various occasions from on or about May 12, 2000, through on or about June 2000.
1. Respondent performed a non-emergent diagnostic laparoscopy on Patient D on or about May 18, 2000, without adequate consent from Patient D.
- E. Respondent provided medical care to Patient E at The Hospital in Sidney, New York on or about May 28, 1999. Respondent, while using a syringe on Patient E, stuck himself with the needle, but continued to use the same needle and syringe to inject Patient E.
- F. Respondent provided medical care to Patient F at The Hospital in Sidney, New York on or about August 29, 1996. Respondent, after attempting to deliver Patient F's baby using a vacuum extractor, threw and/or dropped and/or put the vacuum extractor on the floor. Respondent then used the same vacuum extractor again after it had been on the floor.
- G. Respondent provided medical care to Patient G at The Hospital in Sidney, New York on or about August 2, 1998. Respondent, after attempting to deliver Patient G's baby using a vacuum extractor, threw and/or dropped and/or put the vacuum extractor on the floor. Respondent then used the same vacuum extractor again after it had been on the floor.
- H. Respondent prescribed medications to Patient H on various occasions from on or about June 1998 through on or about May 2000, including, but not limited to; Roxicet, Tylenol with Codeine, Buspar, Percocet and Darvocet.

1. Respondent, on various occasions, prescribed medication to Patient H without performing and/or documenting a physical examination.
2. Respondent, on various occasions, prescribed medication to Patient H without taking and/or documenting any history.
3. Respondent, despite his alleged reluctance to prescribe Darvocet to Patient H on April 28, 2000, permitted Patient H to have another prescription for Darvocet on May 28, 2000.
4. Respondent prescribed medication to Patient H without adequate medical justification.
5. Respondent, because of his personal and/or professional relationship with Patient H, prescribed medication to Patient H without adequate medical justification.
6. Respondent offered money to Patient H if she would spend time with him outside the hospital.

OHIO STATE MEDICAL BOARD

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SPECIFICATION OF CHARGES

FIRST SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with professional misconduct by reason of his practicing medicine with negligence on more than one occasion in violation of New York Education Law § 6530(3), in that Petitioner charges that Respondent committed two or more of the following:

1. The facts in Paragraphs A and A.1 and/or A.2; B and B.1; C and C.1; D and D.1; E; F; G; H and H.1 and/or H.2 and/or H.3 and/or H.4 and/or H.5 and/or H.6.

SECOND SPECIFICATION

INCOMPETENCE ON MORE THAN ONE OCCASION

Respondent is charged with professional misconduct by reason of his practicing medicine with incompetence on more than one occasion in violation of New York Education Law § 6530(5), in that Petitioner charges that Respondent committed two or more of the following:

2. The facts in Paragraphs A and A.1 and/or A.2; B and B.1; C and C.1; D and D.1; E; F; G; H and H.1 and/or H.2 and/or H.3 and/or H.4 and/or H.5.

OHIO STATE MEDICAL BOARD

JUN 27 2006

THIRD SPECIFICATION
FAILURE TO USE SCIENTIFICALLY ACCEPTED
BARRIER PRECAUTIONS AND INFECTION CONTROL PRACTICES

Respondent is charged with professional misconduct under New York Education Law § 6530(47) by reason of failing to use scientifically accepted barrier precautions and infection control practices, in the Petitioner charges:

3. The facts in Paragraphs E and/or F and/or G.

FOURTH SPECIFICATION
PERFORMING PROFESSIONAL SERVICES
WHICH HAVE NOT BEEN DULY AUTHORIZED
BY THE PATIENT

Respondent is charged with professional misconduct under New York Education Law § 6530(26) by reason of performing professional services which have not been duly authorized by the patient, in that Petitioner charges:

4. The facts in Paragraph D and D.1.

DATED: ^{May 4}~~February~~, 2006
Albany, New York


Peter D. Van Buren
Deputy Counsel
Bureau of Professional
Medical Conduct

OHIO STATE MEDICAL BOARD

JUN 27 2006

EXHIBIT B

Terms of Probation

1. Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by New York State Education Law § 6530 or § 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to New York State Public Health Law § 230(19).
2. Respondent shall maintain active registration of Respondent's license (except during periods of actual suspension) with the New York State Education Department Division of Professional Licensing Services, and shall pay all registration fees.
3. Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Hedley Park Place, 433 River Street Suite 303, Troy, New York 12180-2299 with the following information, in writing, and ensure that such information is kept current: a full description of Respondent's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty days of each action.
4. Respondent shall cooperate fully with, and respond in a timely manner to, OPMC requests to provide written periodic verification of Respondent's compliance with the terms of this Consent Order. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
5. Respondent's failure to pay any monetary penalty by the prescribed date shall subject Respondent to all provisions of law relating to debt collection by New York State, including but not limited to: the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [Tax Law § 171(27)]; State Finance Law § 18; CPLR § 5001; Executive Law § 32].
6. The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of thirty consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in, or intends to leave, active medical practice in New York State for a consecutive thirty day period. Respondent shall then notify the Director again at least fourteen days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period will resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in Exhibit A or are necessary to protect the public health.
7. The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records and/or hospital charts; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.

8. Respondent shall maintain complete and legible medical records that accurately reflect the evaluation and treatment of patients and contain all information required by State rules and regulations concerning controlled substances.
9. Respondent, during each year of the period of probation, shall complete 100 hours of Category I Continuing Medical Education (CME). At least 25 hours each year of said CME shall be in the area of following infection control measures/guidelines in the care of patients. All CME courses are subject to the prior written approval of OPMC.

PRACTICE MONITOR

10. Within thirty days of the effective date of the order, Respondent shall practice medicine only when monitored by a licensed physician, board certified in an appropriate specialty, ("practice monitor") proposed by Respondent and subject to the written approval of the Director of OPMC.
 - a. Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, on a random unannounced basis at least monthly and shall examine a selection (no fewer than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.
 - b. Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
 - c. Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.
 - d. Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC prior to Respondent's practice after the effective date of this Order.
11. Respondent shall comply with this Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or violation of, these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.