

REQUEST FOR PERMANENT WITHDRAWAL  
OF  
APPLICATION FOR MEDICAL LICENSURE

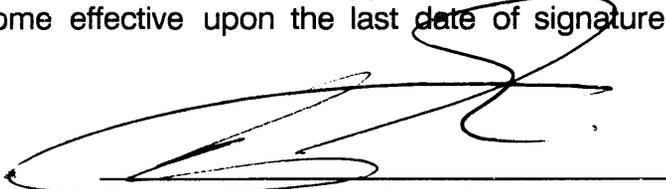
I, Obioma S. Agomuoh, MD, hereby request that my pending application for certificate to practice medicine and surgery in the State of Ohio be withdrawn.

I agree that I will not at any time apply for a certificate to practice medicine and surgery in the State of Ohio, and that any such attempted reapplication shall be considered null and void and shall not be processed by the Board.

I hereby stipulate and agree that I am taking the action described herein in lieu of further formal disciplinary proceedings in accordance with RC Chapter 119 and RC Chapter 4731 for the matters described in the Notice of Opportunity for Hearing dated December 5, 1996. I further stipulate and admit the allegations in said Notice, which is attached hereto as Exhibit A and incorporated herein by this reference.

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

It is understood and agreed that this Request for Permanent Withdrawal of Application for Medical Licensure shall be considered a public record as that term is used in RC 149.43. Further, this Request for Permanent Withdrawal of Application for Medical Licensure shall be accepted and become effective upon the last date of signature below.

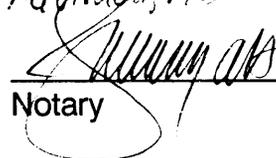


Obioma S. Agomuoh, MD  
400.100.034.77.706

Sworn to before me this 14<sup>TH</sup> day of February, 1997.

By AGOMUOH S. OBI AKA OBLOMAS AGOMUOH, MD.

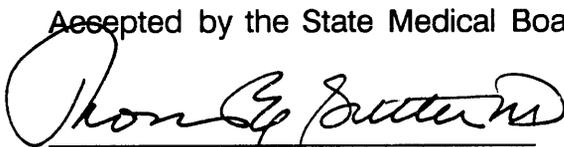
(SEAL)



Notary

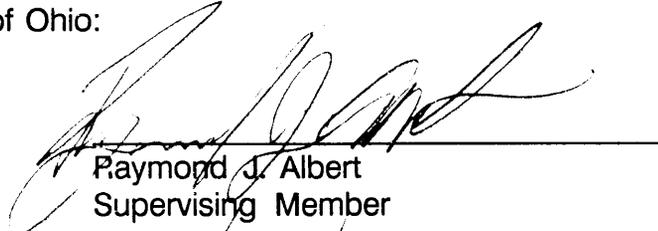
JOYCE E. WYATT  
NOTARY PUBLIC - WAYNE COUNTY, MI  
ACTING IN CARLETON CO., MI  
MY COMMISSION EXPIRES 07/19/99

Accepted by the State Medical Board of Ohio:



Thomas E. Gretter, MD  
Secretary

3/2/97  
Date



Raymond J. Albert  
Supervising Member

3/13/97  
Date



# STATE MEDICAL BOARD OF OHIO

## 1896 - 1996 Celebrating One Hundred Years

November 13, 1996

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Board Member  
Westerville, Ohio

**Obioma Sylvester Agomuoh, M.D.**  
3538 Valleston Pkwy #2  
Toledo, OH 43607

Dear Doctor Agomuoh:

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

- (1)(a) On or about February 29, 1996, you filed a Request for Application Forms for Medical or Osteopathic (Request for Application Forms) licensure in Ohio.
- (b) Subsequently, on or about March 1, 1996, you filed an Application for Certificate - Medicine or Osteopathic Medicine (Application for Certificate) in Ohio by endorsement, which is currently pending.
- (2)(a) In the "Graduate Medical Education" section of your Request for Application Forms, paragraph 1(a) above, you were required to: "List ALL graduate medical education (internship, residency or clinical fellowship) undertaken in the U.S. or Canada."
  - (b) You failed to disclose that you were a Fellow in the Maternal-Fetal Medicine Division of OB/GYN, The School of Medicine of the University of Connecticut Health Center, Farmington, Connecticut, from July 1, 1993, until you resigned, effective November 5, 1993.
- (3)(a) In connection with your Application for Certificate, you submitted four separate Resumes to the Board. The first Resume was submitted on or about March 1, 1996, ("Resume #1"). The second Resume was submitted on or

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about April 10, 1996, ("Resume #2"). The third Resume was submitted on or about April 22, 1996, ("Resume #3"). The final Resume was submitted on or about August 26, 1996, ("Resume #4").

- (b) Each of the Resumes you submitted included the following instructions:

List ALL activities in chronological order from the date of medical school graduation to the present time using MONTH and YEAR. For any non-working time, you must state on the resume exactly what your activities were, such as "looking for residency program" or "vacation" as well as your permanent address for this period.

- (c) (i) In Resumes #1, #2, and #3 you indicated that from June 1992 until September 1992 you were awaiting your FLEX results and from September 1992 through December 1993 you were an attending physician at Union and St. Barnabas Hospitals in Bronx, New York. The termination date on Resume #3, concerning your employment at Union and St. Barnabas Hospitals, was obscured during your fax transmittal and is unreadable.
- (ii) In Resume #4, you indicated that from July 1992 until August 1992 you were awaiting your FLEX results. You then noted, for the first time, that you had been an assistant attending physician at Woodhull Hospital in Brooklyn, New York, from August 1992 to September 1992. You also noted that you were an assistant attending physician at St. Barnabas Hospital and an attending physician at Union Hospital in September 1992, but indicated that you left those hospitals in June 1993 instead of December 1993 as stated on Resumes 1, 2, and 3.

You also stated, again for the first time, that you had been an Instructor in a Maternal/Fetal Medicine Fellowship at the University of Connecticut Health Center, Farmington, Connecticut, from July 1993 to September 1993, and that from October 1993 to January 1994 you were looking for a job.

- (iii) In fact, you were an assistant attending physician at Woodhull Medical and Mental Health Center, Brooklyn, New York, from August 3, 1992, until you resigned, effective November 27, 1992.

Further, you were an assistant attending physician at St. Barnabas Hospital and an attending physician at Union Hospital, Bronx, New York, from December 1992 to September 1993.

Further, you were a Fellow in the Maternal/Fetal Medicine Division of OB/GYN, a fellowship program at The School of Medicine of the University of Connecticut Health Center, Farmington, Connecticut, from July 1, 1993 until you resigned, effective November 5, 1993.

- (4)(a) In your Application for a Certificate, paragraph 1(b) above, in the section entitled Additional Information - Medicine or Osteopathic Medicine you answered "No" to question #4 which asks:

Have you ever resigned from, withdrawn from, or have you ever been warned by, censured by, been put on probation by, been requested to withdraw from, dismissed from, been refused renewal of a contract by, or expelled from, a medical school, clinical clerkship, externship, preceptorship, or graduate medical education?

- (b) In fact you resigned from the Maternal/Fetal Medicine Division of OB/GYN, a fellowship program at The School of Medicine of the University of Connecticut Health Center, Farmington, Connecticut, effective November 5, 1993.
- (5) Further, in addition to the above, your application for licensure in the State of Ohio is incomplete, as you have refused to execute the releases necessary to obtain information regarding your participation in, and subsequent resignation from, the Maternal-Fetal Medicine Division of OB/GYN fellowship program at The School of Medicine of the University of Connecticut Health Center, Farmington, Connecticut.

Your acts, conduct, and/or omissions as alleged in paragraphs (2), (3), and (4) above, individually and/or collectively, constitute "fraud, misrepresentation, or deception in applying for or securing any license or certificate issued by the board," as that clause is used in Section 4731.22(A), Ohio Revised Code.

Further, your acts, conduct, and/or omissions as alleged in paragraphs (2), (3), and (4) above, individually and/or collectively, constitute "publishing a false, fraudulent, deceptive, or misleading statement," as that clause is used in Section 4731.22(B)(5), Ohio Revised Code.

Further, your acts, conduct, and/or omissions as alleged in paragraphs (2), (3), and (4) above, individually and/or collectively, constitute a failure to furnish satisfactory proof of good moral character as required by Section 4731.29(A), Ohio Revised Code, to wit: Section 4731.08, 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 (30) days of the time of mailing of this notice.

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

In the event that there is no request for such hearing received within thirty (30) days of the time of mailing of this notice, the State Medical Board may, in your absence and upon

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consideration of this matter, determine whether or not to limit, revoke, suspend, refuse to register or reinstate your certificate to practice medicine and surgery or to reprimand or place you on probation.

Copies of the applicable sections are enclosed for your information.

Very truly yours,

A handwritten signature in cursive script, appearing to read 'T. E. Gretter, M.D.', written in dark ink.

Thomas E. Gretter, M.D.  
Secretary

TEG/bjm

Enclosures

CERTIFIED MAIL # P 152 982 990  
RETURN RECEIPT REQUESTED

rev.2/15/95