

August 14, 2007

Date Order Filed AUG 22 2007

DEPARTMENT OF HEALTH, BOARD OF MEDICINE
ORDER FACT SHEET

1) Respondent's Name: **Dora Zaretsky, MD** **Complaint # 200717298**

2) License Number: **ME 95849**

3) Profession Type: PHYSICIAN

4) Type of Order: NON-DISCIPLINARY CITATION
 DISCIPLINARY CITATION
 UNLICENSED ACTIVITY CITATION

5) DOAH Case Number: N/A

6) Statutory Violations Found: S. 458.331(1)(g)(nn), F.S.

7) Violation Codes: 15, 18, 98

8) Penalties Imposed: \$ 339.00

9) Closure code: **4084 – Non-Disciplinary**
 4085 - Disciplinary
 4185 – Unlicensed Activity

10) Exhibits to be Attached to Final Order: (3)

- a) Administrative Complaint
- b) Consent Agreement/Stipulation Check
- c) Recommended Order Check
 - i) Exceptions: Petitioner's Check Respondent's Check
- d) Motions (Specify)
- e) Other (Specify) (Specify)

11) Special Handling Instructions _____

Fact Sheet Prepared By: Sharon Stempowski, Investigation Specialist II 

Codes Added to Fact Sheet By: _____

Exhibits Attached to Order By: _____



FILED
DEPARTMENT OF HEALTH
DEPUTY CLERK
CLERK: *[Signature]*
DATE: 07/08/07

Charlie Crist
Governor

Ana M. Viamonte Ros, M.D., M.P.H.
Secretary of Health

**UNIFORM NON-DISCIPLINARY CITATION
BOARD OF MEDICINE**

Issued to: <u>Dora Zaretsky, MD</u>	Citation Number: <u>200717298</u>
<u>1624 Lake Avenue</u>	Case Number: <u>200717298</u>
<u>Merrick, New York 11566</u>	Date of Violation: <u>October 07, 2006</u>
License Number: <u>95849</u>	Profession: <u>1501</u>

Pursuant to Section 456.077 F.S., the undersigned hereby certifies that she has probable cause to believe that on **October 07, 2006**, the above referenced subject did violate the following provision(s) of law: pursuant to S. 456.013, F.S., 458.331(1)(g)(nn), F.S., and Rule 64B8-4.009(8)(c), F.A.C, by committing the following act(s): Failure to timely complete and/or submit proof of completion for 2 (two) hours of Medical Errors continuing medical education required for initial licensure. The extension deadline date was October 07, 2006.

Pursuant to Rule 64B8-8.017(3)(a) Florida Administrative Code, the Board/Department has set the following penalty for violation of the aforesaid provision: **\$250.00** plus costs in the amount of **\$89.00**. Within twelve months of the date of citation is issued, Respondent must submit certified documentation of completion of 2 (two) hours CME requirements for the period for which the citation was issued. Prior to renewing the license for the next biennium, Respondent must document compliance with the CME requirements for the relevant period.

Total amount due \$339.00

On behalf of: Ana M. Viamonte Ros, M.D., M.P.H., Secretary of Health
ISSUED this 21st day of June, 2007 by:

[Signature]
Sharon Stempowski, Investigation Specialist II

If you do not dispute the citation within, thirty (30) days of service, the citation will automatically be filed as a final order of the board but will not be considered disciplinary action against your license. If you accept this citation, it will be filed as a final order and total payment of fine and cost is due thirty (30) days from the date the citation is filed and becomes a final order. In order to dispute this citation you must do so in writing. Send the written dispute and a copy of the citation by certified mail to the following address:

Department of Health, Consumer Services Unit
4052 Bald Cypress Way Bin C#75
Tallahassee Florida 32399-3275

You may elect to have these charges prosecuted as a disciplinary action according to section 456.073 Florida Statutes, rather than accept this citation. In the event that you elect to have these charges prosecuted pursuant to section 456.073 Florida Statutes, the case will be presented to the appropriate probable cause panel or the Department for a determination of probable cause. Please understand that if you choose this option, any penalties imposed by the board will be counted as discipline.

PLEASE CHECK ONE OF THE FOLLOWING AND SIGN:

(1) I CHOOSE TO ACCEPT THE NON-DISCIPLINARY CITATION

(2) I CHOOSE NOT TO ACCEPT THE NON-DISCIPLINARY CITATION AND WISH TO HAVE THIS CASE PROSECUTED UNDER SECTION. 456.073, FLORIDA STATUTES.

Signed: *[Signature]* Date: 07/08/07
PLEASE READ THE INFORMATION ON THE REVERSE SIDE OF THIS FORM

**IMPORTANT INFORMATION REGARDING
COMPLIANCE WITH THIS NON-DISCIPLINARY CITATION**

This citation automatically becomes a final order of the board if you do not dispute the citation within thirty (30) days of the date the citation was served. All fines and costs are due thirty (30) days from the date the citation becomes a final order. Please attach a copy of the citation with your payment. Payment should be made payable to the Department of Health. Payment shall be mailed to the following address:

DOH/MQAMS/Client Services
Post Office Box 6320
Tallahassee, Florida 32314-6320

Any continuing education requirements shall be completed within the timeframe specified in the citation and proof of compliance documented with the Department of Health. Proof of completion must be mailed to:

DOH/HMQAMS/Client Services
Compliance - Bin C01
4052 Bald Cypress Way
Tallahassee, Florida 32399-3251

After this citation becomes a final order, failure to pay the fine and costs specified and provide proof of required continuing education within the timeframe specified on this citation constitutes a violation of a final order of the board, and may subject you to disciplinary action and referral to a collection agency.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Citation has been served upon:

DORA ZARETSKY, MD

At: 1624 LAKE AVENUE, MERRICK, NEW YORK, 11566

() By Personal Service () U.S. Certified Mail, Restricted Delivery, this 29 day of July, 2007.

Signature


Department of Health Representative

Charlie Crist
Governor

RECEIVED

JUL 18 2007

Compliance Management Unit



07 JUL 12
Ana M. Viamonte Ros, M.D., M.P.H.
Secretary of Health

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Department of Health, Consumer Services Unit
4052 Bald Cypress Way Bin C#75
Tallahassee Florida 32399-3275

You may elect to have these charges prosecuted as a disciplinary action according to section 451 Florida Statutes, rather than accept this citation. In the event that you elect to have these charges prosecuted pursuant to section 456.073 Florida Statutes, the case will be presented to the appropriate probable cause panel or the Department for a determination of probable cause. Please understand that if you choose this option, any penalties imposed by the board will be counted as discipline.

Received Date : 7/13/2007
Deposit Date : 7/16/2007
Deposit # : 167816
Batch Number : 001001094
Validation # : 907009719
Check Amount : \$339.00
PRO_CODE : 1501