



***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**

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

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

May 4, 2004

***CERTIFIED MAIL-RETURN RECEIPT REQUESTED***

Ronald Ira Leifer, M.D.  
215 North Cayuga Street  
Ithaca, NY 14850

Re: License No. 081725

Dear Dr. Leifer:

Enclosed please find Order #BPMC 04-93 of the New York State Board for Professional Medical Conduct. This order and any penalty provided therein goes into effect May 11, 2004.

If the penalty imposed by the Order is a surrender, revocation or suspension of this license, you are required to deliver to the Board the license and registration within five (5) days of receipt of the 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: Charles Guttman, Esq.  
411 North Tioga Street  
Ithaca, NY 14850



Professional Licensing Services, and pay all registration fees. This condition shall be in effect beginning thirty days after the effective date of this order and will continue while the licensee possesses his/her license; and

That Respondent shall cooperate in every respect with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this order and in its investigation of all matters regarding Respondent. Respondent shall respond in a timely manner to each and every request by OPMC to provide written periodic verification of Respondent's compliance with the terms of this order. Respondent shall meet with a person designated by the Director of OPMC as directed. Respondent shall respond promptly and provide any and all documents and information within Respondent's control upon the direction of OPMC. This condition shall be in effect beginning upon the effective date of the order and will continue while the order is in effect.

I stipulate that any failure by me to comply with such conditions shall constitute misconduct as defined by New York State Education Law §6530(29).

I agree that in the event I am charged with professional misconduct in the future, this agreement and order shall be admitted into evidence in that proceeding.

I make this application to the State Board for Professional Medical Conduct (the Board) and request that it be granted.

I understand that, in the event that this application is not granted by the Board, nothing contained herein shall be binding upon me or construed to be an admission of any act of misconduct alleged or charged against me, such application shall not be used against me in any way and shall be kept in strict confidence. Denial of this application by the

Board shall be made without prejudice to the continuance of any disciplinary proceeding and the final determination by the Board pursuant to the provisions of the Public Health Law.

I agree that, in the event the Board grants my application, as set forth herein, an order of the Chairperson of the Board shall be issued in accordance with same. I agree that the order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the order to me at the address set forth in this agreement, or to my attorney, or upon transmission via facsimile to me or my attorney, whichever is earliest.

I am making this application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner. In consideration of the value to me of the acceptance by the Board of this application, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive any right I may have to contest the order for which I hereby apply, whether administratively or judicially, and ask that the application be granted.

AFFIRMED:

DATED 4/15, 2004



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**RONALD LEIFER, M.D.**  
Respondent

The undersigned agree to the attached application of the Respondent and to the proposed penalty based on the terms and conditions thereof.

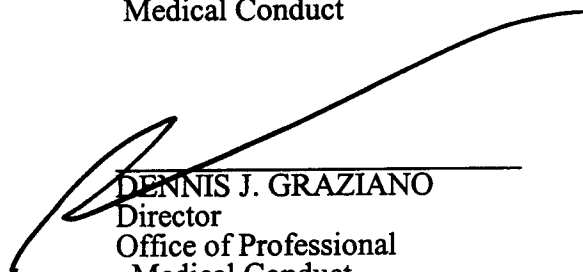
DATE: April 15, 2004

  
CHARLES GUTTMAN, ESQ  
Attorney for Respondent

DATE: 4/26, 2004

  
KEVIN C. ROE  
Associate Counsel  
Bureau of Professional  
Medical Conduct

DATE: 4/30, 2004

  
DENNIS J. GRAZIANO  
Director  
Office of Professional  
Medical Conduct

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

IN THE MATTER  
OF  
RONALD LEIFER, M.D.

CONSENT  
ORDER

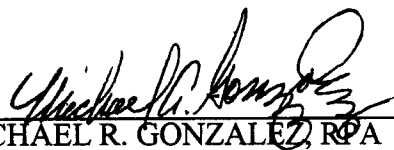
Upon the proposed agreement of **RONALD LEIFER, M.D.** for Consent Order, which application is made a part hereof, it is agreed to and

ORDERED, that the application and the provisions thereof are hereby adopted, and it is further

ORDERED, that this order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the Consent Order to Respondent at the address set forth in this application or to Respondent's attorney by certified mail, or upon transmission via facsimile to Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 5/3, 2004

  
MICHAEL R. GONZALEZ, RPA  
Vice Chair  
State Board for Professional  
Medical Conduct

## EXHIBIT B

### Terms of Monitoring

1. Respondent shall conduct himself in all ways in a manner befitting his professional status, and shall conform fully to the moral and professional standards of conduct and obligations imposed by law and by his profession.
2. Respondent shall submit written notification to the New York State Department of Health addressed to the Director of the Office of Professional Medical Conduct, New York State Department of Health, 433 River Street, Suite 303, Troy, NY 12180-2299; said notice is to include a full description of any employment and practice, professional and residential addresses and telephone numbers within or without New York State, and any and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty days of each action.
3. The period of monitoring shall be tolled during periods in which Respondent is not engaged in the active practice of medicine in New York State. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in or intends to leave the active practice of medicine in New York State for a period of thirty (30) consecutive days or more. Respondent shall then notify the Director again prior to any change in that status. The period of probation shall resume and any terms of probation which were not fulfilled shall be fulfilled upon Respondent's return to practice in New York State.
4. Respondent's professional performance may be reviewed by the Director of OPMC. This review may include, but shall not be limited to, a review of office records, patient records and/or hospital charts, interviews with or periodic visits with Respondent and his/her staff at practice locations or OPMC offices.
5. Respondent shall maintain legible and complete medical records which accurately reflect the evaluation and treatment of patients. The medical records shall contain all information required by State rules and regulations regarding controlled substances.
6. 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. This term shall become effective 30 days after the effective date of the Order.
  - 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 on a random unannounced basis at least bi-monthly and/or shall examine a adequate random selection 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 with particular attention to the prescribing of psychopharmaceutical medications. Within the first thirty days of the period of monitoring, Respondent shall consult with the monitor regarding all patients receiving psychopharmaceutical treatment. During the period of monitoring, Respondent shall consult with the monitor regarding any new patients for whom psychopharmaceutical treatment is contemplated. 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 to the Director of OPMC.
  - d. After two years of monitoring, with the approval of the monitor, Respondent may apply to the Director of OPMC for modification or termination of the monitoring.
  - e. 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.
7. Prior to the expiration of the first six months of the term of monitoring, Respondent shall enroll in and successfully complete a continuing medical education program regarding prescribing of psychopharmaceuticals selected by Respondent and approved by the Director of OPMC.
  8. Respondent shall comply with all terms, conditions, restrictions, limitations and penalties to which he or she is subject pursuant to the Order and shall assume and bear all costs related to compliance. Upon receipt of evidence of noncompliance with, or any violation of these terms, the Director of OPMC and/or the Board may initiate a violation proceeding and/or any such other proceeding against Respondent as may be authorized pursuant to the law.



# EXHIBIT A

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

-----X

IN THE MATTER : STATEMENT  
OF : OF  
RONALD IRA LEIFER, M.D. : CHARGES

-----X

RONALD IRA LEIFER, M.D., the Respondent, was authorized to practice medicine in New York State on October 28, 1958, by the issuance of license 081725 by the New York State Education Department.

## FACTUAL ALLEGATIONS

A. Respondent treated Patient A from on or about September 14, 1998, to on or about February 22, 2002, at his office, 215 North Cayuga Street, Ithaca, NY. Respondent's care and treatment of Patient A failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or record an adequate history.
2. Respondent diagnosed post-traumatic stress disorder without adequate medical justification.

B. Respondent treated Patient B from on or about September 18, 2000, to on or about November 8, 2001, at his office. Respondent's care and treatment of Patient B failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or document an adequate history.
2. Respondent prescribed Klonopin without adequate medical justification.
3. Respondent prescribed Valium and Ambien in combination and/or alternatively without adequate medical justification.
4. Respondent failed to adequately address patient non-compliance.

C. Respondent treated Patient C from on or about October 29, 1997 to on or about February 1, 2001, at his office. Respondent's care and treatment of Patient C failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or document an adequate history.
2. Respondent prescribed Xanax, Paxil, and Ambien in combination, in varying doses, in varying frequencies, and/or alternatively without adequate medical justification.
3. Respondent failed to adequately address patient non-compliance.

D. Respondent treated Patient D from on or about January 4, 2002, to on or about February 27, 2002, at his office.

Respondent's care and treatment of Patient D failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or document an adequate history.
2. Respondent prescribed Xanax, Paxil, Restoril, and Ambien in combination, in varying doses, in varying frequencies, and/or alternatively without adequate medical justification.
3. Respondent failed to adequately address patient non-compliance.
4. Respondent prescribed benzodiazepines on a "prn" basis without adequate medical justification.

E. Respondent treated Patient E from on or about April 27, 1993, to on or about July 10, 2001, at his office.

Respondent's care and treatment of Patient E failed to meet acceptable standards of medical care, in that:

1. Respondent prescribed lithium on a "prn" basis without adequate medical justification.
2. Respondent failed to obtain lithium levels.
3. Respondent failed to order kidney function tests in a timely manner.
4. Respondent failed to adequately evaluate Patient E at regular intervals during the course of treatment.

F. Respondent treated Patient F from on or about January 4, 2000, to on or about February 19, 2002, at his office. Respondent's care and treatment of Patient F failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or document an adequate history.
2. Respondent failed to perform and/or document an adequate mental status examination.
3. Respondent failed to adequately address/evaluate patient claims of alien abduction.
4. Respondent prescribed Xanax on a "prn" basis without adequate medical justification.

G. Respondent treated Patient G from on or about August 30, 2000, to on or about February 19, 2002, at his office. Respondent's care and treatment of Patient G failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or document an adequate history.
2. Respondent failed to perform and/or document an adequate mental status examination.
3. Respondent prescribed Ambien without adequate medical justification.
4. Respondent prescribed Pamelor without adequate medical justification.
5. Respondent prescribed Trazalor without adequate medical justification.
6. Respondent prescribed Pamelor, Valium, Elavil,

Restoril, trazadone, and Ambien in combination, in varying doses, in varying frequencies, and/or alternatively without adequate medical justification.

H. Respondent treated Patient H from on or about August 30, 2001, to on or about February 22, 2002, at his office. Respondent's care and treatment of Patient H failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or document an adequate history.
2. Respondent failed to perform and/or document an adequate mental status examination.
3. Respondent prescribed Xanax on a "prn" basis without adequate medical justification.

I. Respondent treated Patient I from on or about August 30, 2001, to on or about February 22, 2002, at his office. Respondent's care and treatment of Patient I failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or document an adequate history.
2. Respondent failed to perform and/or document an adequate mental status examination.
3. Respondent diagnosed dementia nos without adequate medical justification.
4. Respondent diagnosed dementia due to HIV without adequate medical justification.

J. Respondent treated Patient J from on or about January 13, 2000, to on or about February 14, 2002, at his office. Respondent's care and treatment of Patient J failed to meet acceptable standards of medical care, in that:

1. Respondent failed to obtain and/or document an adequate history.
2. Respondent failed to perform and/or document an adequate mental status examination.
3. Respondent prescribed Xanax on a "prn" basis without adequate medical justification.
4. Respondent prescribed Prozac on a "prn" basis without adequate medical justification.

#### **SPECIFICATIONS**

#### **FIRST THROUGH TENTH SPECIFICATIONS**

#### **GROSS NEGLIGENCE**

Respondent is charged with gross negligence on a particular occasion in violation of New York Education Law §6530(4), in that Petitioner charges:

1. The facts in Paragraphs A and A.1 and/or A.2.

2. The facts in Paragraphs B and B.1, B.2, B.3, and/or B.4.
3. The facts in Paragraphs C and C.1, C.2, and/or C.3.
4. The facts in Paragraphs D and D.1, D.2, D.3, and/or D.4.
5. The facts in Paragraphs E and E.1, E.2, E.3, and/or E.4.
6. The facts in Paragraphs F and F.1, F.2, F.3, and/or F.4.
7. The facts in Paragraphs G and G.1, G.2, G.3, G.4, G.5, and/or G.6.
8. The facts in Paragraphs H and H.1, H.2, and/or H.3.
9. The facts in Paragraphs I and I.1, I.2, I.3, and/or I.4.
10. The facts in Paragraphs J and J.1, J.2, J.3, and/or J.4.

**ELEVENTH THROUGH TWENTIETH SPECIFICATIONS**

**GROSS INCOMPETENCE**

Respondent is charged with gross incompetence on a particular occasion in violation of New York Education Law §6530(6), in that Petitioner charges:

11. The facts in Paragraphs A and A.1 and/or A.2.
12. The facts in Paragraphs B and B.1, B.2, B.3, and/or B.4.
13. The facts in Paragraphs C and C.1, C.2, and/or C.3.
14. The facts in Paragraphs D and D.1, D.2, D.3, and/or D.4.
15. The facts in Paragraphs E and E.1, E.2, E.3, and/or E.4.
16. The facts in Paragraphs F and F.1, F.2, F.3, and/or F.4.

17. The facts in Paragraphs G and G.1, G.2, G.3, G.4, G.5, and/or G.6.
18. The facts in Paragraphs H and H.1, H.2, and/or H.3.
19. The facts in Paragraphs I and I.1, I.2, I.3, and/or I.4.
20. The facts in Paragraphs J and J.1, J.2, J.3, and/or J.4.

**TWENTY FIRST SPECIFICATION**

**NEGLIGENCE ON MORE THAN ONE OCCASION**

Respondent is charged with negligence on more than one occasion in violation of New York Education Law §6530(3), in that Petitioner charges two or more of the following:

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

**TWENTY SECOND SPECIFICATION**

**INCOMPETENCE ON MORE THAN ONE OCCASION**

Respondent is charged with incompetence on more than one occasion in violation of New York Education Law §6530(5), in that Petitioner charges two or more of the following:

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



DATED: *April 22*, 2004  
Albany, New York

*Peter D Van Buren*

PETER D. VAN BUREN  
Deputy Counsel  
Bureau of Professional  
Medical Conduct