

Howard A. Zucker, M.D., J.D.
Acting Commissioner of Health

NEW YORK
state department of
HEALTH

Public

Sally Dreslin, M.S., R.N.
Executive Deputy Commissioner

December 31, 2014

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Veena Garyali, M.D.

REDACTED

Re: License No. 138859

Dear Dr. Garyali:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 14-329. This order and any penalty provided therein goes into effect January 7, 2015.

Please direct any questions to: Board for Professional Medical Conduct, 90 Church Street, 4th Floor, New York, NY 10007-2919, telephone # 212-417-4445.

Sincerely,

REDACTED

Katherine A. Hawkins, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Kevin E. Hulslander, Esq.
Smith, Sovik, Kendrick & Sugnet
250 S. Clinton Street, Suite 600
Syracuse, NY 13202

**IN THE MATTER
OF
VEENA GARYALI, M.D.**

**CONSENT
ORDER**

Upon the application of Veena Garyali, M.D. (Respondent) 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 Consent 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.

SO ORDERED.

DATE: 12/30/2014

REDACTED

ARTHUR S. HENGERER, 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
VEENA GARYALI, M.D.

CONSENT
AGREEMENT

Veena Garyali, M.D., represents that all of the following statements are true:

That on or about July 13, 1979, I was licensed to practice as a physician in the State of New York, and issued License No. 138859 by the New York State Education Department.

My current address is REDACTED

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 (Board) has charged me with one or more specifications of professional misconduct, as set forth in a Statement of Charges, marked as Exhibit "A", attached to and part of this Consent Agreement.

I plead no contest to the First Specification, in full satisfaction of the charges against me, and agree to the following penalty:

- A two year, stayed suspension of my medical license pursuant to Public Health Law § 230-a(2); and

- Three years of probation in accordance with the terms set forth in Exhibit B, hereto, pursuant to Public Health Law § 230-a(9).

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

That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ Law § 6502 including but not limited to the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees. Respondent shall not exercise the option provided in N.Y. Educ. Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 120 days after the Consent Order's effective date and will continue so long as Respondent remains a licensee in New York State; and

That Respondent shall remain in continuous compliance with all requirements of N.Y. Pub. Health Law § 2995-a(4) and 10 NYCRR 1000.5, including but not limited to the requirements that a licensee shall report to the department all information required by the Department to develop a public physician profile for the licensee; continue to notify the department of any change in profile information within 30 days of any change (or in the case of optional information, within 365 days of such change); and, in addition to such periodic reports and notification of any changes, update his

or her profile information within six months prior to the expiration date of the licensee's registration period. Licensee shall submit changes to his or her physician profile information either electronically using the department's secure web site or on forms prescribed by the department, and licensee shall attest to the truthfulness, completeness and correctness of any changes licensee submits to the department. This condition shall take effect 30 days after the Order's effective date and shall continue so long as Respondent remains a licensee in New York State. Respondent's failure to comply with this condition, if proven and found at a hearing pursuant to N.Y. Pub. Health Law § 230, shall constitute professional misconduct as defined in N.Y. Educ. Law § 6530(21) and N.Y. Educ. Law § 6530(29). Potential penalties for failure to comply with this condition may include all penalties for professional misconduct set forth in N.Y. Pub. Health Law § 230-a, including but not limited to: revocation or suspension of license, Censure and Reprimand, probation, public service and/or fines of up to \$10,000 per specification of misconduct found; and

That Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204-2719, with the following information, in writing, and ensure that this 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, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information. This condition shall take effect 30 days after the Order's effective date and shall continue at all times until Respondent receives written notification from the Office of Professional Medical Conduct, Physician Monitoring Program, that OPMC has determined that Respondent has fully complied with and satisfied the requirements of the Order, regardless of tolling; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Consent Order and in its investigations of matters concerning Respondent. Respondent shall respond in a timely manner to all OPMC requests for written periodic verification of Respondent's compliance with this Consent Order.

Respondent shall meet with a person designated by the Director of OPMC, as directed. Respondent shall respond promptly and provide all documents and information within Respondent's control, as directed. This condition shall take effect upon the Board's issuance of the Consent Order and will continue so long as Respondent remains licensed in New York State.

I stipulate that my failure to comply with any conditions of this Consent Order shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

I agree that, if I am charged with professional misconduct in 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 N.Y. Pub. 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 Consent 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 Consent Order, this agreement, and all attached Exhibits shall be public documents, with only patient identities, if any, redacted. As public documents, they may be posted on the Department's website. OPMC shall report this action to the National Practitioner Data Bank and the Federation of State Medical Boards, and any other entities that the Director of OPMC shall deem appropriate.

I stipulate that the proposed sanction and Consent Order are authorized by N.Y. Pub. Health Law §§ 230 and 230-a, and that the Board and OPMC 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 I ask that the Board adopt this Consent Agreement.

I understand and agree that the attorney for the Department, the Director of OPMC and the Chair of the Board each retain complete discretion either to enter into the proposed agreement and Consent Order, based upon my application, or to decline to do so. I further understand and agree that no prior or separate written or oral communication can limit that discretion.

DATE 12/23/14

REDACTED

VEENA GARYAL, M.D.
RESPONDENT

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

DATE:

12/23/14

REDACTED

KEVIN E. HULSLANDER, ESQ.
Smith, Sovik, Kendrick & Sugnet
Attorney for Respondent

DATE:

12/24/14

REDACTED

TIMOTHY J. MAHAR
Associate Counsel
Bureau of Professional Medical Conduct

DATE:

12/30/14

REDACTED

KEITH W. SERVIS
Director
Office of Professional Medical Conduct

IN THE MATTER

OF

VEENA GARYALI, M.D.

Veena Garyali, M.D., the Respondent, was authorized to practice medicine in New York State on or about July 13, 1979, by the issuance of license number 138859 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. Respondent provided medical care to Patient A (patients are identified in Appendix A) at the Cayuga Medical Center during the period from August 20, 2010 through August 23, 2010 for a psychosis, among other conditions. Respondent's medical care of Patient A deviated from accepted standards of medical care as follows:
1. Respondent failed to adequately review Patient A's medical record regarding drug testing and/or Respondent failed to order an adequate toxicology study for Patient A.
 2. Respondent failed to adequately assess Patient A at the time of discharge from the hospital.
 3. Respondent failed to formulate and/or document an adequate discharge plan for Patient A.
 4. Respondent failed to maintain an adequate medical record for Patient A.

B. Respondent provided medical care to Patient B at the Cayuga Medical Center during the period from August 21, 2010 through August 22, 2010 for a suicide gesture and depression disorder, among other conditions. Respondent's medical care of Patient B deviated from accepted standards of medical care in the following respects:

1. Respondent's failed to obtain an adequate medical history from Patient B and/or her family, including, but not limited to, the failure to obtain a history regarding self-inflicted injuries; and/or statements of suicidal ideation; and/or medications.
2. Respondent failed to perform an adequate physical examination of Patient B.
3. Respondent inappropriately discharged Patient B from the hospital.
4. Respondent failed to adequately assess and/or evaluate the risks to Patient B at discharge.
5. Respondent failed to adequately consult with Dr. Gerson prior to discharging Patient B from the hospital.
6. Respondent failed to maintain an adequate medical record for Patient B.

C. Respondent provided medical care to Patient C at the Cayuga Medical Center during the period including October 30, 2010 through October 31, 2010 for drug overdose, cocaine dependence, bipolar disorder, among other conditions. Patient C had been treated for cocaine intoxication following a suicide attempt during the previous 30 days. Respondent's medical care of Patient C deviated from accepted standards of medical care as follows:

1. Respondent failed to perform an adequate mental status examination on Patient C.
2. Respondent failed to adequately evaluate Patient C's risk factors other than his suicidal or homicidal ideation and/or failed to document the same.
3. Respondent failed to adequately evaluate and/or assess Patient C's bipolar disease.

4. Respondent failed to adequately assess Patient C for drug rehabilitation and/or out-patient drug treatment.
5. Respondent failed to adequately assess and/or monitor Patient C for the risk of drug interactions.
6. Respondent failed to maintain an adequate medical record for Patient C.

D. Respondent provided medical care to Patient D at her offices and at the Coming Hospital during the period including April 9, 2012 through February 18, 2013 for depressive disorder and drug overdose, among other conditions. Respondent's care of Patient D deviated from accepted standards of medical care as follows:

1. Respondent failed to adequately document in the hospital record, Respondent's rationale for reassessing the patient's suicide risk and/or Respondent's rationale for changing the patient's treatment plan at the time of discharge on April 26, 2012.

E. Respondent provided medical care to Patient E at her offices and at the Elmira Psychiatric Center and at the WCA Center during the period from September 1, 2011 through July 17, 2012 for mood disorder, ADHD, and suicidal thoughts, among other conditions. Respondent's medical care of Patient E deviated from accepted standards of medical care as follows:

1. Respondent failed to adequately assess and/or monitor the risk for drug interactions.
2. Respondent failed to adequately order the dosage of Abilify for Patient E.
3. Respondent failed to adequately monitor and/or evaluate Patient E's response to his drug regimen.
4. Respondent prescribed an inappropriate dosage of Welbutrin to Patient E in 2012.
5. Respondent failed to maintain an adequate medical record for Patient E.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(3) by practicing the profession of medicine with negligence on more than one occasion as alleged in the facts of:

1. The facts as alleged in two or more of the following paragraphs: A and A.1, and/or A and A.2, and/or A and A.3, and/or A and A.4, and/or B and B.1, and/or B and B.2, and/or B and B.3, and/or B and B.4, and/or B and B.5, and/or B and B.6, and/or C and C.1, and/or C and C.2, and/or C and C.3, and/or C and C.4, and/or C and C.5, and/or C and C.6, and/or D and D.1, and/or E and E.1, and/or E and E.2 and/or E and E.3, and/or E and E.4, and/or E and E.5

SECOND SPECIFICATION

INCOMPETENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(5) by practicing the profession of medicine with incompetence on more than one occasion as alleged in the facts of:

2. The facts as alleged in two or more of the following paragraphs: A and A.1, and/or A and A.2, and/or A and A.3, and/or A and A.4, and/or B and B.1, and/or B and B.2, and/or B and B.3, and/or B and B.4, and/or B and B.5, and/or B and B.6, and/or C and C.1, and/or C and C.2, and/or C and C.3, and/or C and C.4, and/or C and C.5, and/or C and C.6, and/or D and D.1, and/or E and E.1, and/or E and E.2, and/or E and E.3, and/or E and E.4, and/or E and E.5

DATE: December 24, 2014
Albany, New York

REDACTED

Michael A. Hiser
Deputy Counsel
Bureau of Professional Medical Conduct

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 N.Y. Educ. Law §§ 8530 or 8531 shall constitute a violation of probation and may subject Respondent to an action pursuant to N.Y. Pub. Health Law § 230(19).
- 2) 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.
- 3) 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].
- 4) The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 30 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 30 day period. Respondent shall then notify the Director again at least 14 days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period shall 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 as are necessary to protect the public health.
- 5) 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, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
- 6) Respondent shall adhere to federal and state guidelines and professional standards of care with respect to infection control practices. Respondent shall ensure education, training and oversight of all office personnel involved in medical care, with respect to these practices.

- 7) 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.
- 8) Respondent shall enroll in and successfully complete a continuing education program in the area of evaluation of psychiatric diseases. This continuing education program is subject to the Director of OPMC's prior written approval and shall be successfully completed within the first 90 days of the probation period.
- 9) Within thirty days of the Consent Order's effective date and for the first two years of probation, and subject to the tolling provision of paragraph 4 above, 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. Any medical practice in violation of this term shall constitute the unauthorized practice of medicine.
 - 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.
- 10) Respondent shall comply with this Consent Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a 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.