COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.                                               Board of Registration in Medicine

                                          Adjudicatory Case No. 2017-045

In the Matter of

ALAN S. ROCKOFF, M.D.

STATEMENT OF ALLEGATIONS

The Board of Registration in Medicine (Board) has determined that good cause exists to believe the following acts occurred and constitute a violation for which a licensee may be sanctioned by the Board. The Board therefore alleges that Alan S. Rockoff, M.D. (Respondent) has practiced medicine in violation of law, regulations, or good and accepted medical practice as set forth herein. The investigative docket number associated with this order to show cause is Docket No. 14-264.

Biographical Information

1. The Respondent was born on March 15, 1947. He graduated from the Albert Einstein College of Medicine, Yeshiva University, New York in 1972. He is certified by the American Board of Dermatology and Pediatrics. He has been licensed to practice medicine in Massachusetts under certificate number 41315 since 1977. He has privileges at St. Elizabeth’s Hospital and Beth Israel Deaconess.

Factual Allegations

2. On May 11, 2010, when Patient A was 61-years-old, the Respondent examined Patient A in his office and noted that she had lesion on her chest which he diagnosed as benign. In his note, the Respondent failed to describe where on Patient A’s chest the lesion was located.

3. On September 2, 2010, the Respondent saw Patient A and performed a curettage biopsy. A curettage biopsy is not the recommended form of evaluation for all types of suspected skin cancer.

4. The specimen from the curettage biopsy did not survive processing and no definitive diagnosis was rendered by the pathologist.

5. On September 8, 2010, the Respondent emailed Patient A and wrote “Good News. No skin cancer found”. The Respondent’s interpretation of the biopsy was incorrect. The Respondent should have told Patient A that the biopsy had not survived processing. The Respondent should have offered to perform a repeat biopsy.

6. In July 2017, the Respondent voluntarily underwent a practice audit during which fifty of the Respondent’s records were reviewed. The audit found that the Respondent’s records were substandard. Additionally, the audit recommended a functional capacity evaluation focused on issues of coordination and fine motor dexterity given the Respondent’s routine completion of small procedures such as excisions and biopsies.

Legal Basis for Proposed Relief

A. Pursuant to G.L. c. 112, §5, eighth par. (c) and 243 CMR 1.03(5)(a)3, the Board may discipline a physician upon proof satisfactory to a majority of the Board, that he engaged in conduct that places into question the Respondent’s competence to practice medicine, including but not limited to negligence on repeated occasions.
The Board has jurisdiction over this matter pursuant to G.L. c. 112, §§ 5, 61 and 62. This adjudicatory proceeding will be conducted in accordance with the provisions of G.L. c. 30A and 801 CMR 1.01.

Nature of Relief Sought

The Board is authorized and empowered to order appropriate disciplinary action, which may include revocation or suspension of the Respondent's license to practice medicine. The Board may also order, in addition to or instead of revocation or suspension, one or more of the following: admonishment, censure, reprimand, fine, the performance of uncompensated public service, a course of education or training or other restrictions upon the Respondent's practice of medicine.

Order

Wherefore, it is hereby ORDERED that the Respondent show cause why the Board should not discipline the Respondent for the conduct described herein.

By the Board of Registration in Medicine,

[Signature]

Kathleen Sullivan Meyer
Vice Chair

Date: November 22, 2017