

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BEFORE THE STATE BOARD OF CHIROPRACTIC

Commonwealth of Pennsylvania
Bureau of Professional and
Occupational Affairs

vs.

Daniel D. Pompa, D.C.,
Respondent

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:
: Docket No. 13 84-43-03
: File No. 03-43-08039
:
:

PROTHONOTARY
2004 JUN 28 11:10 AM
Department of State

CONSENT AGREEMENT AND ORDER

The Commonwealth and Respondent stipulate as follows in settlement of the above-captioned case.

1. This matter is before the State Board of Chiropractic ("Board") pursuant to the Chiropractic Practice Act, Act of December 16, 1986, P.L. 1646, No. 188, as amended ("Act"), 63 P.S. §625.101 et seq.

2. At all relevant and material times, Daniel D. Pompa, D.C. ("Respondent") held a license to practice chiropractic in the Commonwealth of Pennsylvania, license number DC-006390-L.

3. Respondent admits that the following facts are true:

a. Respondent's license is current through September 1, 2004 and may be renewed thereafter upon the filing of the appropriate documentation and payment of the necessary fees.

b. Respondent's last known address on file with the Board is 4905 William Penn Highway, Monroeville, Pennsylvania 15146.

c. On or about August 30, 2002, Respondent submitted his renewal for the period September 2, 2002 through September 1, 2004. A true and correct copy is attached as Exhibit 1.

d. On the renewal, Respondent indicated that he had completed 24 hours of continuing education between September 2, 2000 and September 1, 2002.

e. Respondent took ~~only~~ no credits of qualifying education within the appropriate time frame of September 2, 2000 through September 1, 2002.

4. The actions of Respondent, described above, violated the Act at 63 P.S. §625.507(a) because Respondent failed to provide proof of having completed 24 hours of continuing education between September 2, 2000 and September 1, 2002.

5. The participants consent to issuance of the following Order in settlement of this matter:

a. Respondent violated the Act at 63 P.S. §625.507(a) because Respondent failed to provide proof of having completed 24 hours of continuing education between September 2, 2000 and September 1, 2002.

b. Respondent shall pay a **CIVIL PENALTY** of twelve hundred dollars (\$1,200.00) by cashier's check, certified check, U.S. Postal money order or attorney's check, made payable to "Commonwealth of Pennsylvania." Respondent shall return the full civil penalty with the signed Consent Agreement.

c. Respondent shall obtain the 24 credits for the period September 2, 2000 through September 1, 2002 on or before April 1, 2004. These credits shall be in addition to the 24 credits required for the current renewal period, and may not be applied to Respondent's obligations for the next license renewal. Proof of these credits shall be sent to the Prosecuting Attorney on or before April 1, 2004. In addition, proof of completion of the continuing education requirements for the September 2, 2002 to September 1, 2004 biennial period shall be sent to the Prosecuting Attorney.

d. Failure of Respondent to meet the deadline for obtaining certification regarding her continuing education credits by will result in the INDEFINITE SUSPENSION of Respondent's license to practice chiropractic on that date and remain suspended until such time as she submits verification of completion of the required continuing education credits. Such proof shall consist of photocopies of certificates of attendance.

e. In order to effectuate the indefinite suspension:

- (1). The Prosecuting Attorney for the Commonwealth shall file with the Board a Petition, which indicates that Respondent has failed to comply with the terms of this Consent Agreement.
- (2). Upon a probable cause determination that Respondent has violated any of the terms or conditions of the Consent Agreement and Order, the Board shall, without holding a formal hearing, issue a preliminary order suspending Respondent's license.
- (3). Respondent shall be notified of the Board's preliminary order within three (3) days of its issuance by certified mail and first class mail, postage prepaid, sent to the last registered address on file with the Board.
- (4). Within twenty (20) days of mail of the notification of the Board's action, Respondent may answer the Commonwealth's petition and request that a formal hearing be convened concerning Respondent's violation of the Consent Agreement and Order in which Respondent may seek relief from the preliminary order activating the suspension. Respondent shall serve the Prosecuting Attorney for the Commonwealth with a copy of the answer and all subsequent filings in this matter.

- (5). If a request for a formal hearing is received from Respondent, the Board shall convene a formal hearing within forty-five (45) days from the date of the Board's receipt of Respondent's request for a formal hearing.
- (6). If Respondent files an answer and requests a hearing within the twenty (20) day period, the preliminary order activating the suspension shall remain in effect unless and until the Board issues a determination favorable to Respondent after holding the formal hearing.
- (7). If the Board, after such hearing, makes a determination adverse to Respondent, the Board will issue a final order activating the indefinite suspension of Respondent's license.
- (8). If a request for a formal hearing is not received from Respondent within the prescribed twenty (20) days period, the Board's preliminary order shall become a final order twenty (20) days after the date of its mailing.

6. Respondent acknowledges receipt of an Order to Show Cause in this matter. Respondent knowingly and voluntarily waives the right to an administrative hearing in this matter, and to the following rights related to that hearing: to be represented by counsel at the hearing; the right to present witnesses and testimony in defense or in mitigation of any sanction that may be imposed for a violation; to cross-examine witnesses and to challenge evidence presented by the Commonwealth; to present legal arguments by means of a brief; and to take an appeal from any final adverse decision.

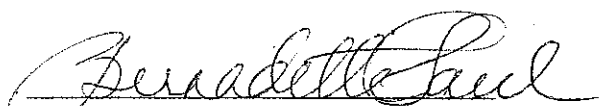
7. This Consent Agreement is between the Commonwealth and Respondent only. Except as otherwise noted, this Agreement is to have no legal effect unless and until the Office of General Counsel approves the contents as to form and legality and the Board issues the stipulated Order.

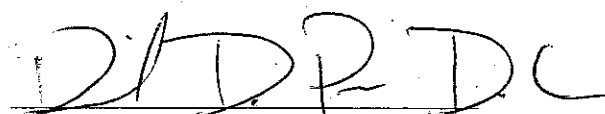
8. Should the Board not approve this Consent Agreement, presentation to and consideration of this Consent Agreement and other documents and matters by the Board shall not prejudice the Board or any of its members from further participation in the adjudication of this matter. The participants waive any objection to a Board member's consideration of this Agreement in the event that the member participated in a prior decision to prosecute this matter. This paragraph is binding on the participants even if the Board does not approve this Consent Agreement.

9. Respondent agrees, as a condition of entering into this Consent Agreement, not to seek modification at a later date of the Stipulated Order adopting and implementing this Consent Agreement without first obtaining the express written concurrence of the Prosecution Division.

10. This agreement contains the whole agreement between the participants. There are no other terms, obligations, covenants, representations, statements or conditions, or otherwise, of any kind whatsoever concerning this agreement.

11. Respondent verifies that the facts and statements set forth in this Agreement are true and correct to the best of Respondent's knowledge, information and belief. Respondent understands that statements in this Agreement are made subject to the criminal penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities.


Bernadette Paul
Prosecuting Attorney
Department of State


Daniel D. Pompa, D.C.
Respondent

DATED: 11/13/03

DATED: 10-29-03

COMMONWEALTH OF PENNSYLVANIA
 DEPARTMENT OF STATE
 BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS
 STATE BOARD OF CHIROPRACTIC

3354

DC006390L
 Renewal ID: 385454
 POMPA

DANIEL D POMPA
 111 WHITEHEAD LANE
 SUITE 300
 MONROEVILLE PA 15146-0000

State Board Of Chiropractic
 PO Box 8415
 Harrisburg, PA 17105-8415

Important Information

You can now renew your license online by pointing your browser to www.myLicense.state.pa.us and following the instructions as indicated. Your license renewal will be processed easier and quicker than by mail.

I have the following liability insurance policy with the minimum of \$100,000/occurrence and \$300,000 annual aggregate:
 Insurance Co. Name: TIG 338 Policy No. 115558001 Expiration Date: 8/14/03
(COMPLETE THE ABOVE INSURANCE INFORMATION - DO NOT SUBMIT THE POLICY DECLARATION PAGE.)

I will not be practicing this profession in Pennsylvania after the expiration date indicated below and request inactive status.
 No fee is required. FORM MUST STILL BE COMPLETED - QUESTIONS ANSWERED, SIGNED AND DATED

Name Change	Address Change
Indicate new name below. Submit a photocopy of a legal document verifying name change (i.e., marriage certificate, divorce decree or legal document indicating retaking of a maiden name, etc.):	

THE FOLLOWING QUESTIONS MUST BE ANSWERED:

YES	NO	If YES to #2, #3, #4, or #5 - provide details AND attach certified copies of legal document(s).
	/	1. Do you hold a license to practice this profession in any other state or jurisdiction? List: _____
	/	2. Since your initial application or your last renewal, have you had disciplinary action taken against your license in any other state or jurisdiction?
	/	3. Since your initial application or your last renewal, have you withdrawn an application for a license, had an application for a license denied or refused, or agreed not to reapply for a license in any state or jurisdiction?
	/	4. Since your initial application or your last renewal, have you been convicted, found guilty or pleaded nolo contendere, or received probation without verdict as to any felony or misdemeanor, including any drug law violations, or any criminal charges pending and unresolved in any state or jurisdiction?
	/	5. Since your initial application or your last renewal, have your provider privileges been terminated by any medical assistance agency for cause?

CONTINUING EDUCATION - SELECT ONE BELOW. You are required to retain your official continuing education certificates of completion earned for this license renewal period until September 1, 2004 and provide them to the Board if requested

- Between 9-2-00 and 9-1-02, I completed 24 hours of approved continuing education and have maintained Certificates of Attendance.
- I obtained licensure for the first time since 9-2-00, and am exempt from continuing education

I verify that this form is in the original format as supplied by the Department of State and has not been altered or otherwise modified in any way. I am aware of the criminal penalties for tampering with public records or information pursuant to 18 PA C.S. 4911 and that any false statement made is subject to the penalties of 18 PA C.S. 4904 relating to unsworn falsification to authorities and may result in my license being disciplined.

Signature of Owner (Mandatory) Daniel D. Pompa Date: 8-30-02

EXPIRATION DATE:	September 1, 2002
FEE - Payable to "COMMONWEALTH OF PENNSYLVANIA" Fees are non-refundable. Write your license number on your payment. A \$20.00 fee will be assessed for returned payment.	Renewal Fee = \$210.00 DC006390L
LATE FEE - \$5.00 per month, or part of a month - plus a \$25.00 Restoration fee. Late renewal fee will be assessed if postmarked after 09-01-2002.	PRACTICING ON AN EXPIRED LICENSE MAY RESULT IN DISCIPLINARY ACTIONS AND ADDITIONAL MONETARY PENALTIES

CHIROPRACTIC RENEWAL APPLICATION - THIS WILL BE YOUR ONLY NOTICE

EXHIBIT

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ORDER

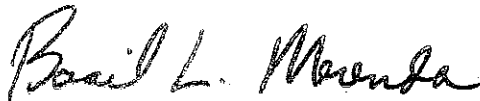
AND NOW, this 22nd day of January, 2004, the State Board of Chiropractic adopts and approves the foregoing Consent Agreement and incorporates the terms of paragraph 5, which shall constitute the Board's Order and is now issued in resolution of this matter.

This Order shall take effect immediately.

BY ORDER:

BUREAU OF PROFESSIONAL AND
OCCUPATIONAL AFFAIRS

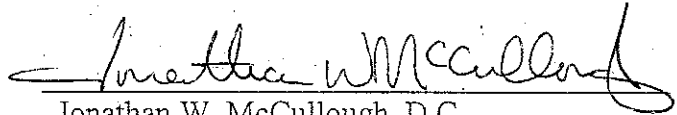
STATE BOARD OF CHIROPRACTIC



Basil L. Merenda
Acting Commissioner

Date of mailing:
For the Commonwealth:

For Respondent:



Jonathan W. McCullough, D.C.
Chairman

1/28/04
Bernadette Paul, Esquire
P. O. Box 2649
Harrisburg, PA 17105-2649

Daniel D. Pompa, D.C.
4905 William Penn Highway
Monroeville, PA 15146

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