OF MEDICAL LICENSURE AND SUPERVISION FILED STATE OF OKLAHOMA

JUN 2 1 2007

| STATE OF OKLAHOMA EX REL. THE OKLAHOMA BOARD OF MEDICAL LICENSURE | 8 |) | OKLAHOMA STATE BOARD OF MEDICAL LICENSURE & SUPERVISION |
|---|------|-----|--|
| AND SUPERVISION, | W-61 | .) | |
| Plaintiff, | |) | |
| v. CAM DINH PHUNG, M.D., | |) | Case No. 06-12-3219 |
| LICENSE NO. 15171 | |) | |
| Defendant. | |) | |

CITATION

YOU ARE HEREBY NOTIFIED that on the 2 day of June, 2007, a sworn Complaint was filed with the undersigned Secretary of the Oklahoma State Board of Medical Licensure and Supervision, State of Oklahoma, charging you with violations of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act at 59 Okla. Stat. §509 (8), (12), (13), (16) and (18), and OAC 435:10-7-4 (1), (2), (6), (11), (18), (27), (39) and (41). A copy of the Complaint is attached hereto and made a part thereof.

On September 20-22, 2007, the Board will be in regular session at 9:00 o'clock a.m., at its offices located at 5104 N. Francis, Suite C, Oklahoma City, Oklahoma, at which time your Complaint will be considered by the Board, and a hearing will be held pursuant to the Oklahoma Administrative Procedures Act, 75 Okla. Stat. §309, et seq., as amended.

If the Board decides, after considering all the testimony and evidence, that you are guilty as charged, your license to practice as a physician within the State of Oklahoma may be suspended or revoked or other disciplinary action may be taken by the Board as authorized by law, including the assessment of costs and attorney's fees for this action as provided by law.

Under the laws of the State of Oklahoma, you are required to file your written Answer under oath with the Secretary of the Board within twenty (20) days after the Citation is served upon you. Unless your Answer is so filed, you will be considered in default, and the Board may accept the allegations set forth in the complaint as true at the hearing of the complaint. If the charges are deemed sufficient by the Board, your license to practice as a physician in the State of Oklahoma may be suspended or revoked.

| THEREFORE, you are cited to | appear at the hearing. | If you are not | present in person, | , you |
|---------------------------------------|------------------------|----------------|--------------------|-------|
| may be present through your attorney. | | | | |

DATED this ______ day of June, 2007 at _______ / 1

GERALD C. ZUMWALT, M.D., Secretary Oklahoma State Board of Medical Licensure and Supervision



RETURN OF SERVICE BY AGENT

| Received the attached and foregoing Citation and Scheduling Order |
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| in the investigation ofCan Dinh Phung, MD, at |
| Oklahoma City, Oklahoma, on the 21 day of June ,2007, |
| and on the 21 day of June ,2007 , at 04:25 o'clock |
| M. served it on the within named by delivering a copy to |
| Can Dinh Phung, MD (Name of person served) |
| At (address): Oklahoma City Family Medical Clinic |
| 2417 N. Classen |
| Oklahoma City, OK 73106 Served by: |
| Subscribed and sworn to before me on this 2 day of June, |
| # 02014304 BELL OF OKLANDER Notary Public |
| My Commission expires: 8-22-2010 |
| CASE NAME: Can Dinh Phung, MD CASE #: 06-12-3219 |