

**IN AND BEFORE THE OKLAHOMA STATE BOARD
OF MEDICAL LICENSURE AND SUPERVISION
STATE OF OKLAHOMA**

FILED

APR 15 2013

OKLAHOMA STATE BOARD OF
MEDICAL LICENSURE & SUPERVISION

STATE OF OKLAHOMA)
EX REL. THE OKLAHOMA BOARD)
OF MEDICAL LICENSURE)
AND SUPERVISION,)
 Plaintiff,)
))
v.))
))
ARDESHIR FAGHIH NIA, M.D.)
LICENSE NO. 24784,)
 Defendant.)

Case No. 12-01-4464

CITATION

YOU ARE HEREBY NOTIFIED that on the 15th day of April, 2013, 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 Medical Practice Act at *Okla. Stat. tit. 59 §509(4) and (13); Oklahoma Administrative Code* section 435:10-7-4 (3) and (39). A copy of the Complaint is attached hereto and made a part thereof.

On **May 16, 2013**, the Board will be in regular session at **9:00 o'clock a.m.**, at its offices located at **101 N.E. 51st Street, 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, *Okla. Stat. tit. 75 §309, et seq.*

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 15th day of April, 2013 at 2:57 p.m.

A handwritten signature in black ink, appearing to read "Gerald C. Zumwalt, M.D.", written in a cursive style.

Gerald C. Zumwalt, M.D.
Secretary and Medical Advisor
Oklahoma State Board of Medical
Licensure and Supervision



RETURN OF SERVICE BY AGENT

Received the attached and foregoing Citation and Scheduling Order in the investigation of Ardeshir Nia, MD, at Oklahoma City, Oklahoma, on the 15 day of April, 2013, and on the 16th day of April, 2013, at 1:55 o'clock P.M. served it on the within named by delivering a copy to Ardeshir Faghiih Nia, MD

(Name of person served)

At (address):

Nia Medical Office

1425 E. Lincoln Rd

B2

Idabel, OK 74745

Served by:

Robert D. [Signature]

Subscribed and sworn to before me on this 18th day of April, 2013



Shelley Crowder

Notary Public

My Commission expires:

8-1-2016

CASE NAME: Nia, MD

CASE #:

12-01-4464

NOTARIAL PUBLIC STATE OF OKLAHOMA

I, the undersigned, do hereby certify that the foregoing is a true and correct copy of the original as shown to me by the person presenting the same for recording.

Given under my hand and seal of office this _____ day of _____, 200__.

Notary Public in and for the State of Oklahoma

My commission expires on the _____ day of _____, 200__.

Witness my hand and seal of office at _____, Oklahoma, this _____ day of _____, 200__.

Notary Public

