

**STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS**

**DEPARTMENT OF HEALTH
BOARD OF MEDICAL
LICENSURE AND DISCIPLINE**

**In the matter of:
DAVE E. DAVID, M.D.
License Number MD13798
BMLD Complaint Number C12-258**

REINSTATEMENT OF PHYSICIAN LICENSE

Pursuant to R.I. Gen. Laws § 5-37-5.2, the Commonwealth of Massachusetts Board of Registration in Medicine notified the Board of Medical Licensure and Discipline that the Respondent had entered into a Voluntary Agreement Not To Practice Medicine. The Rhode Island Board of Medical Licensure and Discipline has jurisdiction to take reciprocal action by virtue of R.I. Gen. Laws § 5-37-5.1(21). The Board has made the following:

FINDINGS OF FACTS

1. The Respondent is 60 year old physician who has been licensed to practice medicine in the State of Rhode Island since 2011. He is a 1978 graduate of the University of South Florida College of Medicine. His primary specialty is Obstetrics and Gynecology.
2. The Respondent had entered into a Voluntary Agreement Not to Practice Medicine with the Commonwealth of Massachusetts Board of Registration in Medicine. That state's Board dismissed Respondent's Voluntary

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Agreement Not to Practice Medicine. Rhode Island's Board accepted Respondent's Voluntary Agreement to Practice Medicine based on the reciprocal action of Massachusetts' Board.

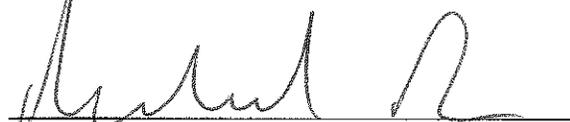
Based on the foregoing, the following is issued:

ORDER

1. The Respondent's Rhode Island Voluntary Agreement Not to Practice Medicine is hereby dismissed without prejudice based on the dismissal of Respondent's reciprocal Massachusetts Board of Registration in Medicine Voluntary Agreement Not to Practice Medicine.
2. Accordingly, the license as a physician issued to Dave E. David, M.D., is hereby reinstated forthwith.

Ratified by the Board of Medical Licensure and Discipline this 11 day of September,

2013



Michael Fine, M.D.
Director of Health
Rhode Island Department of Health
Cannon Building, Room 401
Three Capitol Hill
Providence, RI 02908-5097
Tel. (401) 222-2231
Fax (401) 222-6548

CERTIFICATION OF SERVICE

I hereby certify that a copy of this Reinstatement Order was sent via regular mail to the Respondent and his attorney on the 11th day of September, 2013, at the following addresses:

Dave E. David, M.D.
6 Fredrickson Road
Norfolk, MA 02056

W. Scott Liebert, Esquire
The Law Office of W. Scott Liebert
The Chatham Center
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