

Maria Gonzalez Berlari, M.D.

Date: **March 27, 2024**

Mark Olszyk, M.D., Chair
Disciplinary Panel A
Maryland State Board of Physicians
4201 Patterson Avenue, 4th Floor
Baltimore, MD 21215-2299

Re: Surrender of License to Practice Medicine
Maria Gonzalez Berlari, M.D.
License Number: D96358
Case Number: 2224-0118A

Dear Dr. Olszyk and Members of the Disciplinary Panel A:

Please be advised that, pursuant to Md. Code Ann., Health Occ. ("Health Occ.") §14-403 (2021 Repl. Vol.), I have decided to **SURRENDER** my license to practice medicine in the State of Maryland, License Number D96358, effective immediately. I understand that upon the surrender of my license, I may not give medical advice or treatment to any individual, with or without compensation, and cannot prescribe medications or otherwise engage in the practice of medicine in the State of Maryland as it is defined in the Maryland Medical Practice Act (the "Act"), Health Occ. §§ 14-101 *et seq.* and other applicable laws. In other words, as of the effective date of this Letter of Surrender, I understand that the surrender of my license means that I am in the same position as an unlicensed individual in the State of Maryland.

I understand that this Letter of Surrender is a **PUBLIC DOCUMENT**, and upon Disciplinary Panel A's ("Panel A") acceptance, becomes a **FINAL ORDER** of Panel A of the Maryland State Board of Physicians (the "Board").

I acknowledge that the Board initiated an investigation after receiving information regarding a disciplinary Order for Letter of Reprimand and Probation of my Arizona medical license ("Arizona Order"), dated February 7, 2024. The Arizona Medical Board found that I prescribed controlled substances to immediate family members without maintaining a medical record and without clinical justification, and further found that I prescribed myself controlled substances on five occasions. A copy of the Arizona Order is attached as Attachment 1. I have decided to surrender my license to practice medicine in the State of Maryland to avoid further investigation and prosecution by Panel A based on discipline by the Arizona Medical Board. I recognize that for all purposes relevant to medical licensure that the findings and conclusions in the Arizona Order shall be treated as proven and that these findings and conclusions support a conclusion that I violated Health Occ. § 14-404(a)(21) of the Act (is disciplined by a licensing or disciplinary authority of

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any state for an act that would be grounds for disciplinary action under this section), with an underlying ground of Health Occ. § (3)(ii) (is guilty of unprofessional conduct in the practice of medicine).

I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Letter of Surrender to avoid the issuance of charges and prosecution of the aforementioned findings and conclusions. I do not wish to contest these findings and conclusions. I understand that by executing this Letter of Surrender, I am waiving my right to contest any charges that would issue from Panel A's investigative findings in a formal evidentiary hearing at which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf and all other substantive and procedural protections provided by law, including the right to appeal to circuit court.

I understand that the Board will advise the Federation of State Medical Boards and the National Practitioner Data Bank of this Letter of Surrender. I also understand that in the event I would apply for licensure in any form in any other state or jurisdiction that this Letter of Surrender may be released or published by the Board to the same extent as a final order that would result from disciplinary action, pursuant to Md. Code Ann., Gen. Prov. §§ 4-101 *et seq.* (2021 Repl. Vol.), and that this Letter of Surrender constitutes a disciplinary action by Panel A.

I affirm that I will provide access to and copies of medical records to my patients in compliance with Title 4, subtitle 3 of the Health General Article. I also agree to surrender my Controlled Dangerous Substances Registration to the Office of Controlled Substances Administration.

I further recognize and agree that by submitting this Letter of Surrender, my license in Maryland will remain surrendered unless and until the Board grants reinstatement. In the event that I apply for reinstatement of my Maryland License, I understand that Panel A or its successor is not required to grant reinstatement and, if it does grant reinstatement, may impose any terms and conditions the disciplinary panel considers appropriate for public safety and the protection of the integrity and reputation of the profession. I further understand that if I file a petition for reinstatement, I will approach Panel A or its successor in the same position as an individual whose license has been revoked.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. Finally, I wish to make clear that I have been advised of my right to be represented by an attorney of my choice throughout proceedings before Panel A, including the right to consult with an attorney prior to signing this Letter of Surrender. I was represented by an attorney prior to signing this letter surrendering my license to practice medicine in Maryland. I understand both the nature of Panel A's actions and this Letter of Surrender fully. I acknowledge that I understand and comprehend the language,

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meaning and terms and effect of this Letter of Surrender. I make this decision knowingly and voluntarily.

Very truly yours,
Signature On File

Maria Gonzalez Berlari, M.D.

NOTARY

STATE OF Arizona
CITY/COUNTY OF Maricopa

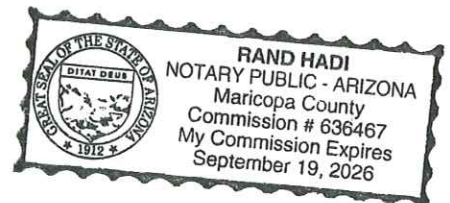
I HEREBY CERTIFY that on this 20th day of March, 2024 before me, a Notary Public of the City/County aforesaid, personally appeared Maria Gonzalez Berlari, M.D., and declared and affirmed under the penalties of perjury that the signing of this Letter of Surrender was voluntary.

AS WITNESS my hand and Notarial seal.



Notary Public

My commission expires: 09/19/2026



ACCEPTANCE

On behalf of Disciplinary Panel A, on this 27th day of March, 2024, I, Christine A. Farrelly, accept the **PUBLIC SURRENDER** of Maria Gonzalez Berlari, M.D.'s license to practice medicine in the State of Maryland.

Signature On File

Christine A. Farrelly, Executive Director
Maryland Board of Physicians