IN THE MATTER OF	BEFORE THE
NIKHIL DESAI, D.O.	MARYLAND STATE
Respondent	BOARD OF PHYSICIANS
License Number: H0094180	Case Number: 2226-0010 A

CONSENT ORDER

On May 12, 2026, Disciplinary Panel A ("Panel A") of the Maryland State Board of Physicians (the "Board") charged **NIKHIL DESAI, D.O.** (the "Respondent"), License Number H0094180, with violating the Maryland Medical Practice Act (the "Act"), Md. Code Ann., Health Occupations ("Health Occ.") § 14-101 *et seq.* (2021 Repl. Vol. & 2025 Supp.). The Respondent was charged under Health Occ. § 14-404(a)(3)(ii) (Is guilty of: . . . [u]nprofessional conduct in the practice of medicine) and Health Occ. § 1-212 and Board's regulations, COMAR 10.32.17, prohibiting sexual misconduct.

On July 8, 2026, Panel A was convened as a Disciplinary Committee for Case Resolution ("DCCR") in this matter. Based on negotiations occurring as a result of this DCCR, the Respondent agreed to enter into this Consent Order, consisting of Findings of Fact, Conclusions of Law, Order, and Consent.

FINDINGS OF FACT

Panel A finds:

I. BACKGROUND

1. At all relevant times, the Respondent was and is licensed to practice medicine in the State of Maryland. The Respondent was initially licensed to practice medicine in

Maryland on or about April 21, 2022, under license number H0094180. His license is currently active through September 30, 2026, subject to renewal.

2. The Respondent is also currently licensed to practice medicine in Virginia, under license number 0102207659, and in Washington, D.C., under license number D0210001710.

3. The Respondent is board-certified in Family Medicine.

II. THE REPORT

4. On or about June 11, 2025, the Board received a Mandated 10-Day Report (the "Report")[1] from a medical practice (the "Practice"),[2] which alleged that the Respondent resigned from the Practice on May 13, 2025 "in connection with an investigation . . . into a patient concern about him kissing her on the forehead, which he acknowledged had occurred."

5. After reviewing the Report, the Board initiated an investigation of the Respondent.

III. THE BOARD INVESTIGATION

6. On or about June 16, 2025, the Board issued a subpoena *duces tecum* to the Practice for the Respondent's complete quality assurance/risk management file; his personnel/human resources file; and all information related to the investigation of the Respondent and his resignation on May 13, 2025.

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[1] *See* Md. Code Ann., Health Occ. § 14-413(a)(1)(i)-(iv) (describing Mandated 10-Day Reports generally).

[2] To ensure confidentiality and privacy, the names of individuals and entities involved in this case, other than the Respondent, are not disclosed in this Consent Order.

7. On or about June 26, 2025, the Practice provided the Board with a response to the subpoena, which included a letter dated April 30, 2025 to the Respondent informing him that he has been placed on administrative leave pending an investigation of a patient complaint received on April 22, 2025; and an email dated May 13, 2025 from the Respondent stating that he is resigning from his position at the Practice for personal reasons effective immediately.

8. On or about August 7, 2025, the Board issued a subpoena *duces tecum* to the Practice for the patient's (the "Patient") medical records for care provided by the Respondent. The Practice provided the records to the Board on or about August 11, 2025. The records revealed that the Respondent treated the Patient on April 15, 2025 during After Hours Care. The records listed another physician ("Physician 1") as the Patient's primary care provider. On April 15, 2025, the Patient presented with right shoulder pain. The Respondent diagnosed the Patient with right shoulder joint pain, prescribed medication, ordered an MRI, and provided the Patient with referrals.

9. The Patient's medical records also show that the Respondent documented a phone call to her on April 20, 2025 at 3:22 PM. He wrote, "Patient, no answer. I sent a message . . . to inquire about her health in [*sic*] any improvement after treatments initiated from After Hours care visit with me. Asked her to contact me back to discuss next steps." On the same day at 4:36 PM, the Respondent documented, "Pt texted back, requested detail info via [the patient portal]."

10. By letter dated August 1, 2025, Board staff informed the Respondent of the Report and of its investigation. Board staff also requested that the Respondent provide a

written response to the allegations in the Report. On or about August 25, 2025, the Respondent's counsel provided a written response, co-signed by the Respondent, in which they stated that the Respondent kissed the Patient on the forehead during her medical appointment with him. They stated that the Respondent then "immediately pulled back and apologized to the [Patient.]" Further, the Respondent "admitted that this was a momentary and inadvertent lapse in judgment[.]"

11. On or about September 3, 2025, Board staff conducted an under-oath interview of Physician 1, the Patient's primary care physician at the Practice. Physician 1 testified that the Patient told her during an in-person appointment that the Respondent "attempted to kiss her during a visit that she had with him." The Patient "described backing away, but the kiss ended up landing on her forehead, which she referred to as a peck." Further, the Patient "reported that after that appointment she received . . . one or two phone calls from [the Respondent] . . . Both to apologize for what happened and to review test results from their visit." Physician 1 stated the Patient "felt very uncomfortable about the phone calls as well as obviously what happened at the visit." Physician 1 observed the Patient to be "very tearful" and "very genuine[.]"

12. On or about December 5, 2025, Board staff conducted an under-oath interview of the Patient, in which she testified to following in part:

a. The Patient was having severe pain in her shoulder and was unable to lift her arm. She needs her arm to work, so she was upset and worried. She made an appointment at the Practice, which ended up being with the Respondent. The Respondent examined her and told her that she would be fine. The Patient testified that while the Respondent was consoling her, he was "patting my arm and rubbing my arm on the side. . . . And before I knew it, he was like coming

in—looked like for a kiss, and I was—it was scenes in slow motion, and I turned my head downward and to the right and he ended up kissing me on my forehead. . . . And all I could see was like his lips coming toward my face, so I put my head down." The Respondent then apologized.

b. The Patient testified that she saw the Respondent's "lips puckered, coming toward my face." She "turned, and put [her] head down to the side . . . and he ended up kissing [her] on **[her] forehead."**

c. The Respondent then said to the Patient, "I'm sorry for the almost kiss."

d. The Patient did not consent to being kissed.

e. A couple of days later, the Respondent called the Patient at night. The Patient could hear that "[the Respondent] was doing dishes or something[.]" The Respondent apologized again for the kiss. The Patient asked the Respondent to put the medical information that he was giving her over the phone on the patient portal.

f. Due to these events, the Patient said, ". . . I feel like I don't even ever want to go to the doctors again."

13. On or about January 8, 2026, Board staff conducted an under-oath interview of the Respondent, in which he admitted to kissing the Patient on the side of her forehead.

14. During the interview, the Respondent also testified to the following in part:

a. At the beginning of the appointment, the Patient was crying while "verbalizing her concern about permanent damage to the shoulder and inability . . . to continue working her job . . . ." The Respondent conceded that he did not document the Patient's emotional status in the medical record, even though it is his typical practice to do so.

b. After the Respondent kissed the Patient, he reacted before the Patient by saying, "I'm sorry. . . . I did not mean to overstep. I apologize. . . I did not mean to make you feel uncomfortable if I had done so."

c. In response, the Patient said in part, "That's life."

d. After the appointment, the Respondent had two conversations with

the Patient during two phone calls. The Respondent did not document the first conversation in the medical record. The Respondent apologized again for making the Patient uncomfortable.

e. The Respondent said: "I felt guilty. I tend to be very self conscious and very – I want to do the right thing. I don't want to hurt anyone, and it was outside of myself that this happened. I feel bad."

f. The Respondent opted to resign from the Practice in lieu of termination.

CONCLUSIONS OF LAW

Based on the foregoing findings of fact, Disciplinary Panel A concludes as a matter of law that the Respondent is guilty unprofessional conduct in the practice of medicine, a violation of Health Occ. § 14-404(a)(3)(ii). The charge related to sexual misconduct, under Health Occ. § 1-212 and COMAR 10.32.17 is **DISMISSED**.

ORDER

It is thus, on the affirmative vote of the quorum of Disciplinary Panel A of the Board, hereby:

ORDERED that the Respondent is **REPRIMANDED**; and it is further

ORDERED that the Respondent is placed on **PROBATION** for **a minimum period of ONE (1) YEAR.**[3] During probation, the Respondent shall comply with the following terms and conditions of probation:

1. Within **SIX (6) MONTHS** the Respondent is required to take and successfully complete courses in **boundaries**. The following terms apply:

   (a) it is the Respondent's responsibility to locate, enroll in and obtain the disciplinary panel's approval of the course before the course is begun;

   (b) the Respondent must provide documentation to the

[3] If the Respondent's license expires during the period of probation, the probation and any conditions will be tolled.

disciplinary panel that the Respondent has successfully completed the course;

(c) the course may not be used to fulfill the continuing medical education credits required for license renewal; and

(d) the Respondent is responsible for the cost of the course.

2. The Respondent shall enroll in the Maryland Professional Rehabilitation Program (MPRP) as follows:

(a) Within 5 business days, the Respondent shall contact MPRP to schedule an initial consultation for enrollment;

(b) Within 15 business days, the Respondent shall enter into a Participant Rehabilitation Agreement and Participant Rehabilitation Plan with MPRP;

(c) the Respondent shall fully and timely cooperate and comply with all MPRP's referrals, rules, and requirements, including, but not limited to, the terms and conditions of the Participant Rehabilitation Agreement(s) and Participant Rehabilitation Plan(s) entered with MPRP, and shall fully participate and comply with all therapy, treatment, evaluations, and screenings as directed by MPRP;

(d) the Respondent shall sign and update the written release/consent forms requested by the Board and MPRP, including release/consent forms to authorize MPRP to make verbal and written disclosures to the Board and to authorize the Board to disclose relevant information from MPRP records and files in a public order. The Respondent shall not withdraw his/her release/consent;

(e) the Respondent shall also sign any written release/consent forms to authorize MPRP to exchange with (i.e., disclose to and receive from) outside entities (including all of the Respondent's current therapists and treatment providers) verbal and written information concerning the Respondent and to ensure that MPRP is authorized to receive the medical records of the Respondent, including, but not limited to, mental health and drug or alcohol evaluation and treatment records. The Respondent shall not withdraw his/her release/consent;

(f) the Respondent's failure to comply with any of the above terms or conditions including terms or conditions of the Participant Rehabilitation Agreement(s) or Participant Rehabilitation Plan(s) constitutes a violation of this Consent Order;

ORDERED that the Respondent shall not apply for early termination of probation; and it is further

ORDERED that a violation of probation constitutes a violation of the Consent Order; and it is further

ORDERED that, after the Respondent has complied with all terms and conditions of probation and the minimum period of probation imposed by the Consent Order has passed, the Respondent may submit to the Board a written petition for termination of probation. After consideration of the petition, the probation may be terminated through an order of the disciplinary panel. The Respondent may be required to appear before the disciplinary panel to discuss his petition for termination. The disciplinary panel may grant the petition to terminate the probation, through an order of the disciplinary panel, if the Respondent has complied with all probationary terms and conditions and there are no pending complaints relating to the charges; and it is further

ORDERED that, if the Respondent allegedly fails to comply with any term or condition imposed by this Consent Order, the Respondent shall be given notice and an opportunity for a hearing. If the disciplinary panel determines there is a genuine dispute as to a material fact, the hearing shall be before an Administrative Law Judge of the Office of Administrative Hearings followed by an exceptions process before a disciplinary panel; and if the disciplinary panel determines there is no genuine dispute as to a material fact,

the Respondent shall be given a show cause hearing before a disciplinary panel; and it is further

ORDERED that after the appropriate hearing, if the disciplinary panel determines that the Respondent has failed to comply with any term or condition imposed by this Consent Order, the disciplinary panel may reprimand the Respondent, place the Respondent on probation with appropriate terms and conditions, or suspend with appropriate terms and conditions, or revoke the Respondent's license to practice medicine in Maryland. The disciplinary panel may, in addition to one or more of the sanctions set forth above, impose a civil monetary fine on the Respondent; and it is further

ORDERED that the Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; and it is further

ORDERED that the effective date of the Consent Order is the date the Consent Order is signed by the Executive Director of the Board or her designee. The Executive Director signs the Consent Order on behalf of the disciplinary panel which has imposed the terms and conditions of this Consent Order; and it is further

ORDERED that this Consent Order is a public document. *See* Md. Code Ann., Health Occ. §§ 1-607, 14-411.1(b)(2) and Gen. Prov. § 4-333(b)(6).

CONSENT

I, Nikhil Desai, D.O., acknowledge that I have consulted with counsel before signing this document.

By this Consent, I agree to be bound by this Consent Order and all its terms and conditions and understand that the disciplinary panel will not entertain any request for amendments or modifications to any condition.

I assert that I am aware of my right to a formal evidentiary hearing, pursuant to Md. Code Ann., Health Occ. § 14-405 and Md. Code Ann., State Gov't §§ 10-201 *et seq.* concerning the pending charges. I waive this right and have elected to sign this Consent Order instead.

I acknowledge the validity and enforceability of this Consent Order as if entered after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural protections as provided by law. I waive those procedural and substantive protections. I acknowledge the legal authority and the jurisdiction of the disciplinary panel to initiate these proceedings and to issue and enforce this Consent Order.

I voluntarily enter into and agree to comply with the terms and conditions set forth in the Consent Order as a resolution of the charges. I waive any right to contest the Findings of Fact and Conclusions of Law and Order set out in the Consent Order. I waive all rights to appeal this Consent Order.

I sign this Consent Order, without reservation, and fully understand the language and meaning of its terms.

07/30/2026
Date

Signature on File
Nikhil Desai, D.O.

NOTARY

STATE OF Maryland

CITY / COUNTY OF Howard

I HEREBY CERTIFY that on this 30th day of July 2026, before me, a Notary Public of the foregoing State and City/County, personally appeared Nikhil Desai, D.O., and made oath in due form of law that signing the foregoing Consent Order was his voluntary act and deed.

AS WITNESSETH my hand and notarial seal.

DAMON ISAAC MCCALL JR
Notary Public - State of Maryland
Howard County
My Commission Expires Jul 11, 2029

Notary Public

My Commission expires: July 11, 2029

ACCEPTANCE

I, Christine A. Farrelly, sign this **CONSENT ORDER** on behalf of Disciplinary Panel A.

08/03/2026
Date

Signature on File
Christine A. Farrelly
Executive Director
Maryland State Board of Physicians