

IN THE MATTER OF

ELIZABETH J. ALLEN, PA

Respondent

LICENSE NUMBER: C01145

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BEFORE THE

MARYLAND BOARD

OF PHYSICIANS

CASE NUMBER: 2222-0077

\* \* \* \* \*

**CONSENT AGREEMENT**

THIS AGREEMENT is made between Disciplinary Panel A of the Maryland State Board of Physicians (the "Board") and Elizabeth J. Allen, PA (the "Respondent"):

WHEREAS, the Respondent is a physician assistant licensed to practice medicine in the State of Maryland, initially licensed on or about August 11, 1988;

WHEREAS, the Board received information that on or about November 18, 2021 the Respondent entered into a Consent Decree and Permanent Injunction in the United States District Court for the District of Maryland (attached);

NOW, THEREFORE, the Respondent agrees not to directly or indirectly administer, dispense, prescribe or distribute any controlled substance in the State of Maryland;

The Respondent further agrees that this Agreement is a public document. See Health Occ. §§1-607, 14-411.1(b)(2) and Gen. Prov. §4-333(b)(6).

01/31/2022  
Date

02/07/2022  
Date

***Signature on File***

Elizabeth J. Allen, PA

***Signature on File***

Christine A. Farrelly  
Executive Director

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**CONSENT**

I, Elizabeth J. Allen, PA, acknowledge that I am aware of my right to consult with and be represented by counsel in considering this Consent Agreement. I have chosen to proceed without counsel and I acknowledge that the decision to proceed without counsel is freely and voluntarily made.

By this Consent, I agree to be bound by this Consent Agreement 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. § 15-315 and Md. Code Ann., State Gov't §§ 10-201 et seq. I waive this right and have elected to sign this Consent Order instead.

I acknowledge the validity and enforceability of this Consent Agreement 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 Agreement.

I voluntarily enter into and agree to comply with the terms and conditions set forth in the Consent Agreement. I waive all rights to appeal this Consent Agreement.

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

01/31/2022  
Date

***Signature on File***

Elizabeth J. Allen, Respondent

**NOTARY**

STATE OF Maryland

CITY/COUNTY OF Bethesda

I HEREBY CERTIFY that on this 31 day of Jan, 2021, before me, a

Notary Public of the State and City/County aforesaid, personally Elizabeth J. Allen, PA, and

made oath in due form of law that the foregoing Consent Order was her voluntary act and deed.

AS WITNESS my hand and notarial seal.

[Signature]  
Notary Public

My Commission expires: Aug 13 2024

