

IN THE MATTER OF	*	BEFORE THE MARYLAND
JOHN TAE SUNG MOON, M.D.	*	STATE BOARD OF
Respondent	*	PHYSICIANS
License Number: D88573	*	Case Number: 2224-0113 A

CONSENT ORDER

On May 28, 2025, Disciplinary Panel A (“Panel A”) of the Maryland State Board of Physicians (the “Board”) charged **John Tae Sung Moon, M.D.** (the “Respondent”), License Number **D88573**, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occupations (“Health Occ.”) §§ 14-101 *et seq.* (2021 Repl. Vol. & 2024 Supp.).

Panel A charged the Respondent under the following provisions of Health Occ. § 14-404:

- (a) *In general.* - Subject to the hearing provisions of § 14-405 of this subtitle, a disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke a license if a licensee:

...

- (3) Is guilty of:

- (ii) Unprofessional conduct in the practice of medicine[.]

Pursuant to Health Occ. § 14-404(a)(3)(ii), the Joint Commission and the American Medical Association (“AMA”) have identified “disruptive behavior” as one form of unprofessional conduct. The Joint Commission and the AMA have addressed “disruptive physician behavior” in published alerts and opinions.

JOINT COMMISSION SENTINEL EVENT ALERT, 2008

On July 9, 2008, the Joint Commission issued a Sentinel Event alert entitled “Behaviors that Undermine a Culture of Safety,” which stated in pertinent part:

Intimidating and disruptive behaviors can foster medical errors . . . contribute to poor patient satisfaction and to preventable adverse outcomes . . . Safety and quality of patient care is dependent on teamwork, communication, and a collaborative work environment. To assure quality and to promote a culture of safety, health care organizations must address the problem of behaviors that threaten the performance of the health care team. Intimidating and disruptive behaviors include overt actions such as verbal outbursts and physical threats . . . Intimidating and disruptive behaviors are often manifested by health care professionals in positions of power . . . Overt and passive behaviors undermine team effectiveness and can compromise the safety of patients . . . All intimidating and disruptive behaviors are unprofessional and should not be tolerated.^{1, 2}

AMA OPINION 9.045, June 2000

AMA Opinion 9.045, entitled, *Physicians with Disruptive Behavior*, adopted in June 2000, states in pertinent part:

- (1) Personal conduct, whether verbal or physical, that negatively affects or that potentially may negatively affect patient care constitutes disruptive behavior. (This includes but is not limited to conduct that interferes with one’s ability to work with other members of the health care team.) However, criticism that is offered in good faith with the aim of improving patient care should not be construed as disruptive behavior.

¹ In 2011, the Joint Commission revised the term “disruptive behavior” to “behavior or behaviors that undermine a culture of safety.”

² In 2016, the Joint Commission noted that “while the term ‘unprofessional behavior’ is preferred instead of ‘disruptive behavior,’ the suggested actions in this alert remain relevant.”

AMA OPINION 9.4.4, JUNE 2016

AMA Code of Medical Ethics: Professional Self-Regulation Opinion 9.4.4,³ adopted in June 2016, pertaining to Physicians with Disruptive Behavior, states in pertinent part:

The importance of respect among all health professionals as a means of ensuring good patient care is foundational to ethics. Physicians have a responsibility to address situations in which individual physicians behave disruptively, that is, speak or act in ways that may negatively affect patient care, including conduct that interferes with the individual's ability to work with other members of the health care team, or for others to work with the physician.

On August 13, 2025, 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 times relevant hereto, the Respondent was and is licensed to practice medicine in the State of Maryland. The Respondent was originally licensed to practice medicine in Maryland on December 3, 2019, under License Number D88573. The Respondent's license expires on September 30, 2025, subject to renewal.

2. The Respondent holds medical licenses in Oregon and California.

³ AMA Opinion 9.045 was revised in 2016 and became AMA Opinion 9.4.4.

3. The Respondent is board-certified in General Surgery.

4. On or around March 2020, the Respondent was employed as a general surgeon by a health care facility (“Facility 1”)⁴ in Kent County, Maryland, where he served as Medical Director of General Surgery and held supervisory responsibilities over other general surgeons until his resignation in May 2024.

II. Board Investigation

5. The Board opened an investigation after receiving an anonymous complaint (the “Complaint”) on November 7, 2023 from an employee at Facility 1 alleging that the Respondent had engaged in abusive and unprofessional behavior toward staff and had been the subject of numerous internal complaints over a period of years.

6. As part of its investigation, the Board reviewed the Respondent’s quality assurance and human resources files from Facility 1, obtained relevant patient medical records, and conducted interviews with staff of Facility 1, including clinical leadership, nursing personnel, and the Respondent himself. The Board also obtained and reviewed internal incident reports, peer review records, and correspondence related to the Respondent’s employment and subsequent separation from Facility 1.

7. The Board’s investigation revealed that the Respondent engaged in a pattern of disruptive and unprofessional behavior between 2022 and 2024, with the three incidents noted below. Staff reports and incident documentation describe the Respondent yelling at colleagues, undermining nursing and surgical staff, and creating confusion regarding

⁴ For confidentiality and privacy purposes, the name of any facility or individual involved in this case will not be disclosed in this Consent Order.

patient management responsibilities. Despite prior interventions, the Respondent's conduct persisted and raised concerns about his ability to function within a multidisciplinary care environment.

8. On or about December 1, 2022, the Respondent became the subject of a formal workplace complaint following an incident in which he confronted a Certified Registered Nurse Anesthetist ("CRNA") during preoperative preparations. Witnesses described the Respondent's conduct towards the CRNA as loud, aggressive, and intimidating, requiring staff intervention. The CRNA resigned shortly thereafter.

9. On or about October 27, 2023, the Respondent engaged in an exchange with staff of Facility 1 regarding the transfer and monitoring of a postoperative patient. The Respondent was alleged to have questioned the actions of nursing staff, challenged established telemetry protocols, while using an aggressive and dismissive tone. The matter escalated to clinical leadership and prompted a formal family complaint.

10. On or about April 21, 2024, the Respondent refused to accept responsibility for an elderly patient referred to him for possible general surgical intervention. Despite being on call and being contacted by Facility 1 staff, the Respondent declined to evaluate the patient, asserting that the matter was not within his scope. The Chief Medical Officer ultimately directed him to report in person to Facility 1. Staff reported that the Respondent's dismissive tone and failure to engage in timely collaboration caused confusion among care teams and delayed surgical management.

11. Following this incident, the Respondent entered into discussions with Facility 1 and agreed to separate from employment effective May 2024.

12. The Respondent's conduct had an adverse effect on patient care coordination and operations at Facility 1. Witnesses described missed handoffs, delayed interventions, and breakdowns in interdisciplinary collaboration, particularly during emergency and high-acuity scenarios. Nurses, emergency physicians, and anesthesiology staff reported uncertainty regarding clinical leadership and frustration with the Respondent's lack of responsiveness. Facility 1's internal incident reports from July 2022 through April 2024 corroborated these concerns, documenting multiple instances of unprofessional conduct that disrupted workflow, escalated stress, and created a destabilizing effect on team performance.

CONCLUSIONS OF LAW

Based on the foregoing findings of fact, Disciplinary Panel A concludes as a matter of law that the Respondent is guilty of unprofessional conduct in the practice of medicine, in violation of Health Occ. § 14-404(a)(3)(ii).

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**⁵ During the probationary period, the Respondent shall comply with the following terms and conditions:

1. Within **SIX (6) MONTHS** of the effective date of this Consent Order, the Respondent is required to take and successfully complete a course in **Professionalism**.

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 has begun;
- (b) the Respondent must provide documentation to the 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;
- (d) the Respondent is responsible for the cost of the course.

2. Within **ONE (1) YEAR** of the effective date of this Consent Order, the Respondent shall pay a civil fine of **TEN THOUSAND DOLLARS (\$10,000.00)**. The Payment shall be by money order or bank certified check made payable to the Maryland Board of Physicians and mailed to P.O. Box 37217, Baltimore, Maryland 21297. The Board will not renew or reinstate the Respondent's license if the Respondent fails to timely pay the fine to the Board; and it is further

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

⁵ If the Respondent's license expires during the period of probation, the probation and any conditions of probation, will be tolled.

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

ORDERED that this Consent Order shall not be amended or modified, and future requests for modification will not be considered by the Board or a disciplinary panel; 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, 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, suspend the Respondent's license 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 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 or her designee 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* Health Occ. §§ 1-607, 14-411.1(b)(2)(2021 Repl. Vol.) and Gen. Prov. § 4-333(b)(6)(2019 Repl. Vol.

Signature on file

09/10/2025
Date

Christine A. Farrelly
Executive Director

CONSENT

I, John Tae Sung Moon, M.D., 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.

Signature on file

8/29/2025

Date

John Tae Sung Moon, M.D.

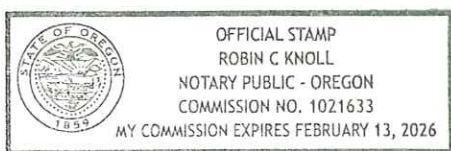
NOTARY

STATE OF Oregon

CITY / COUNTY OF Clatsop

I HEREBY CERTIFY that on this 29 day of August 2025,
before me, a Notary Public of the foregoing State and City/County, personally appeared
John Tae Sung Moon, M.D. 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.




Notary Public

My Commission expires: Feb. 13, 2026