

Jeffrey Carlton Roeser, M.D.

July 9, 2025

Date

Mark D. 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
Jeffrey Carlton Roeser, M.D. License Number: D91431
Case Number: 2225-012

Dear Dr. Olszyk and Members of Disciplinary Panel A,

Please be advised that, pursuant to Md. Code Ann., Health Occ. ("Health Occ.") §14-403, I have decided to **SURRENDER** my license to practice medicine in the State of Maryland, License Number D91431, effective immediately. I understand that upon 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, it becomes a **FINAL ORDER** of Panel A of the Maryland State Board of Physicians (the "Board").

I acknowledge that the Board received my letter self-reporting that I voluntarily surrendered my medical license in Connecticut following a complaint that I was terminated from ProHealth Physicians for having a sexual relationship with a patient. Additionally, after undergoing an evaluation, it was deemed that I am unfit to practice medicine at this time. The Board began an investigation of these allegations. I have decided to surrender my license to practice medicine in the State of Maryland to avoid further investigation and prosecution of these allegations. I recognize that for all purposes relevant to medical licensure, these allegations shall be treated as proven and that these allegations support the conclusion that I violated Health Occ. § 14-404(a) 3(i), 3(ii), and (4).

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

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aforementioned allegations. I do not wish to contest these allegations. I understand that by executing this Letter of Surrender, I am waiving my right to contest any charges that would be issued 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.*, 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 Substance Registration to the Office of Controlled Substances Administration.

I further recognize and agree that by submitting this Letter of Surrender, my license 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 ever 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 understand both the nature of Panel A's actions and this Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning and terms and effect of this Letter of Surrender. I make this decision knowingly and voluntarily.

Very truly yours, ***Signature On File***

Jeffrey Carlton Roeser, M.D.

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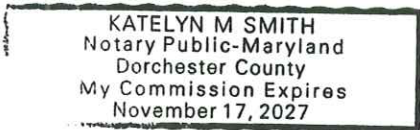
NOTARY

STATE OF Maryland

CITY/COUNTY OF Dorchester

I HEREBY CERTIFY that on this 7th day of JULY, 2025 before me, a Notary Public of the City/County aforesaid, personally appeared Jeffrey Carlton Roeser, 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.



Katelyn M. Smith
Notary Public

My commission expires: 11/17/27

ACCEPTANCE

On behalf of Disciplinary Panel A, on this 9th day of July, 2025, I, Christine A. Farrelly, accept the **PUBLIC SURRENDER** of Jeffrey Carlton Roeser, M.D.'s license to practice medicine in the State of Maryland.

Signature On File

Christine A. Farrelly, Executive Director
Maryland Board of Physicians