

Carolyn J. Pass, M.D.

March 16, 2023
Date: .

Damean W.E. Freas, D.O., Chair
Disciplinary Panel B
Maryland State Board of Physicians
4201 Patterson Avenue, 4th Floor
Baltimore, MD 21215-2299

Re: Permanent Surrender of License to Practice Medicine
Carolyn J. Pass, M.D. License Number: D10952
Case Number: 2223-0028 B

Dear Dr. Freas and Members of the Disciplinary Panel B,

Please be advised that, pursuant to Md. Code Ann., Health Occ. ("Health Occ.") §14-403 (2021 Repl. Vol.), I, pursuant to the duly authorized powers of attorney held by my sons Steven Susel and Gary Susel to manage all of my affairs, have decided to **PERMANENTLY SURRENDER** my license to practice medicine in the State of Maryland, License Number D10952, 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 Permanent Letter of Surrender is a **PUBLIC DOCUMENT**, and upon Disciplinary Panel B's ("Panel B's") acceptance, becomes a **FINAL ORDER** of Panel B of the Maryland State Board of Physicians (the "Board").

I acknowledge that the Board received a complaint from a patient that included concerns about my health, and the Board initiated an investigation. The Board's investigation revealed that I have health issues that are affecting my ability to practice medicine safely. I further acknowledge that on February 7, 2023, Panel B summarily suspended my license. I have decided to surrender my

license to practice medicine in the State of Maryland to avoid further investigation and the issuance of charges.

I recognize that for all purposes related to medical licensure in Maryland that I violated Health Occ. § 14-404(a)(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 further prosecution of the 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 issue from Panel B's investigative findings in a formal evidential 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 provide 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.* (2022), and that this Letter of Surrender constitutes a disciplinary action by Panel B.

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. In other words, I agree that I have no right to reapply and will not reapply for a license to practice medicine in the State of Maryland. I further acknowledge that the Board is not obligated to consider any application for licensure or reinstatement that I might file at a future date.

Permanent Letter of Surrender
In re: Carolyn J. Pass, M.D.
License No. D10952; Case No. 2223-0028B

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever.

I have consulted with and 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 B'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.

Signature On File

Steven and Gary Susel, pursuant to
powers of attorneys on behalf of Carolyn
J. Pass, M.D.

NOTARY

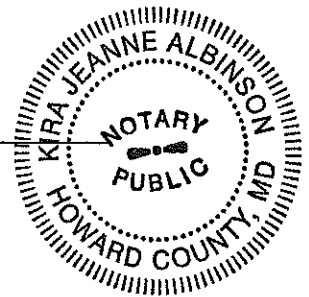
STATE OF Maryland
CITY/COUNTY OF Howard

I HEREBY CERTIFY that on this 9 day of March, 2023 before me, a Notary Public of the City/County aforesaid, personally appeared Steven and Gary Susel, pursuant to powers of attorneys on behalf of Carolyn J. Pass, M.D., and declared and affirmed under the penalties of perjury that the signing of this Letter of Surrender was a voluntary act and deed.

AS WITNESS my hand and Notarial seal.



Notary Public



My commission expires: 04/12/2025

ACCEPTANCE

On behalf of Disciplinary Panel B, on this 16th day of March, 2023, I, Christine A. Farrelly, accept the **PUBLIC SURRENDER** of Carolyn J. Pass, M.D.'s license to practice medicine in the State of Maryland.

Signature On File

Christine A. Farrelly, Executive Director
Maryland Board of Physicians