Adolfo Lopez, M.D.

Date: June 27, 2019

Damean W.O. 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

Adolfo Lopez, M.D. License Number: D14811 Case Number: 7719-0041

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 (2014 Repl. Vol. & 2017 Supp.), I have decided to permanently **SURRENDER** my license to practice medicine in the State of Maryland, License Number D14811, 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 Permanent Letter of Surrender, I understand that the permanent 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") acceptance, becomes a **FINAL ORDER** of Panel B of the Maryland State Board of Physicians (the "Board").

I acknowledge that, pursuant to the December 17, 2018 Order After Show Cause Hearing, Panel B found that I violated a prior consent order and, as part of the sanction, ordered that I contact the Maryland Professional Rehabilitation Program for an initial evaluation. The evaluation concluded that I am not currently competent to independently practice medicine. I have decided to surrender my license to practice medicine in the State of Maryland to avoid further investigation and prosecution of this allegation. I recognize that for all purposes relevant to medical licensure that this allegation shall be treated as proven and that the evaluation supports a conclusion that I violated Health Occ. § 14-404(a) (4) (professionally, physically or mentally incompetent).

Damean W.O. Freas, D.O. and Members of Disciplinary Panel B

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Permanent Letter of Surrender

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I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Permanent Letter of Surrender to avoid the issuance of charges and prosecution of the aforementioned allegation. I do not wish to contest this allegation.

I understand that by executing this Permanent Letter of Surrender I am waiving my right to a hearing to contest any charges that would issue from Panel B'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 Permanent 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 Permanent 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.* (2014 Repl. Vol. & 2017 Supp.), and that this Permanent 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 further recognize and agree that by submitting this Permanent Letter of Surrender, my license in Maryland will remain permanently 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 acknowledge that I may not rescind this Permanent 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 B, including the right to consult with an attorney prior to signing this Permanent Letter of Surrender. I have knowingly and willfully waived my right to be represented by an attorney before signing this letter permanently surrendering my license to practice medicine in Maryland. I understand both the nature of Panel B's actions and this Permanent Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning and terms and effect of this Permanent Letter of Surrender. I make this decision knowingly and voluntarily.

Very truly yours, **Signature on File**

Adolfo Lopez, M.D.

Damean W.O. Freas, D.O. and Members of Disciplinary Panel B
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NOTARY

STATE OF Mary	and
CITY/COUNTY OF	Baltimore

I HEREBY CERTIFY that on this day of day of , 2019 before me, a Notary Public of the City/County aforesaid, personally appeared Adolfo Lopez, M.D., and declared and affirmed under the penalties of perjury that the signing of this Permanent Letter of Surrender was a voluntary act and deed.

AS WITNESS my hand and Notarial seal.

Notary Public

JENNAyMARNE ROTH expires:
Notary Public
Baltimore County
Maryland
My Commission Expires Mar. 13, 2022

ACCEPTANCE

On behalf of Disciplinary Panel B, on this 27 day of June, 2019, I, Christine A. Farrelly, accept the PUBLIC PERMANENT SURRENDER of Adolfo Lopez, M.D.'s license to practice medicine in the State of Maryland.

Signature on File

Christine A. Farrelly, Executive Director Maryland Board of Physicians