

**Joseph L. Raffetto, M.D.**

Harbhajan Singh Ajrawat, M.D., Chair  
Disciplinary Panel B  
Maryland State Board of Physicians  
4201 Patterson Avenue, 4<sup>th</sup> Floor  
Baltimore, MD 21215-2299

Re: Surrender of License to Practice Medicine  
Joseph L. Raffetto, M.D.  
License Number: D20441  
Case Number: 2223-0079

Dear Dr. Ajrawat and Members of Disciplinary Panel B,

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 D20441, 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 B's ("Panel B") acceptance, becomes a **FINAL ORDER** of Panel B of the Maryland State Board of Physicians (the "Board").

I acknowledge that the Board received a Mandated 10-Day Report from a hospital stating that I was terminated after an internal investigation, which included an audit of my computer usage, a review of patient records, and hospital video surveillance that found that I created medical records that indicated that I had seen and rounded on eight patients that I did not physically assess. 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 and due to my retirement. I recognize that for all purposes relevant to medical licensure that these allegations shall be treated as proven and that these allegations support a conclusion that I violated Health Occ. § 14-404(a) (11).

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 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

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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 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 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 B 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 B 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 B, including the right to consult with an attorney prior to signing this Letter of Surrender. 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.

Verv truly yours.

***Signature On File***

Joseph L. Raffetto, M.D.

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**NOTARY**

STATE OF Maryland  
CITY/COUNTY OF Wicomico

I HEREBY CERTIFY that on this 9 day of October, 2023, before me, a Notary Public of the City/County aforesaid, personally appeared Joseph L. Raffetto, 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.



Milton Glen Catlin  
Wicomico County MD  
Commission Expires  
January 4th 2025

Milton Catlin  
Notary Public

My commission expires: 01/04/2025

**ACCEPTANCE**

On behalf of Disciplinary Panel B, on this 23<sup>rd</sup> day of October, 2023, I, Christine A. Farrelly, accept the **PUBLIC SURRENDER** of Joseph L. Raffetto, M.D.'s license to practice medicine in the State of Maryland.

***Signature On File***

Christine A. Farrelly, Executive Director  
Maryland Board of Physicians