

**IN THE MATTER OF**  
**RUSSELL R. De LUCA, M.D.**  
**Respondent**  
**License Number: D31551**

**\* BEFORE THE**  
**\* MARYLAND STATE**  
**\* BOARD OF PHYSICIANS**  
**\* Case Number: 2221-0156B**

\* \* \* \* \*

**CONSENT ORDER**

On October 7, 2022, Disciplinary Panel B (“Panel B”) of the Maryland State Board of Physicians (the “Board”) charged **RUSSELL R. DE LUCA, M.D.** (the “Respondent”), License Number D31551, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 14-101 et seq. (2021 Repl Vol.).

Panel B charged the Respondent with violating the following provisions of the Act:

**§ 14-404. Denials, reprimands, probations, suspensions, and revocations – Grounds.**

(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 the licensee:

...

(22) Fails to meet appropriate standards as determined by appropriate peer review for the delivery of quality medical and surgical care performed in an outpatient surgical facility, office, hospital, or any other location in this State[.]

On February 22, 2023, Panel B was convened as a Disciplinary Committee for Case Resolution (“DCCR”) in this matter. Based on the 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 B finds the following:

#### **I. BACKGROUND**

1. At all times relevant to these charges, 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 October 17, 1984. His license is currently active and is scheduled to expire on September 30, 2024.

2. The Respondent is Board certified in Internal Medicine, Medical Oncology, Hematology, and Hospice and Palliative Care.

3. The Respondent is a hematology/oncology and palliative care physician and a partner at a Facility in Maryland.

#### **II. THE COMPLAINT**

4. On or about June 2, 2021, the Board received a complaint (“Complaint 1”) alleging that the Respondent was unnecessarily “prescribing 8-9 30 milligram Oxycodone pills a day”.

5. The Complaint was submitted by a patient’s husband, from whom the patient had recently separated.

### **III. BOARD INVESTIGATION**

6. The Board opened an investigation into the Complaint. In furtherance of the investigation, the Board notified the Respondent of its investigation, provided the Respondent with the Complaint, directed him to submit a written response to the Complaint and issued a subpoena to him for a series of patient records. The Board also obtained a peer review of the Respondent's practice.

#### **Patient Records**

7. By letter dated August 4, 2021, the Board notified the Respondent that it had initiated an investigation of the Complaints, provided him a copy of the Complaint and directed him to provide a written response to the allegations raised in the Complaints. The Board also issued him a subpoena *duces tecum* for the medical records of ten (10) specific patients (Patients 1-10).<sup>1</sup>

8. On or about September 3, 2021, the Board received a written response from the Respondent through counsel which included the Certification of Medical Records, the summaries of medical treatment and the patient's medical records. The Respondent denied the allegations.

#### **Peer Review**

9. In furtherance of its investigation, the Board submitted the medical records of Patients 1-10 for a peer review. Two peer reviewers, each board-certified in Internal

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<sup>1</sup> For confidentiality reasons, the names of the patients will not be identified by name in this document. The Respondent may obtain the identity of the patients by contacting the Board.

Medicine, Oncology, and Hematology independently reviewed the materials and submitted their reports to the Board.

10. In their reports, the two peer reviewers concurred that the Respondent failed to meet appropriate standards for the delivery of quality medical care for seven (7) patients.

11. Specifically, the peer reviewers found that for the seven (7) patients, the Respondent failed to meet the standard of quality medical care regarding the management of patients with chronic pain disorders for reasons including but not limited to the following areas:

- (a) The Respondent failed to evaluate the potential for abuse and diversion with each patient and discuss and/or document the risk factors for opioid related harms and address these concerns with the patients (Patients 1, 2, 3, 5, 7);
  - i. The daily dose of oxycodone prescribed to Patient 1 and Patient 2 is well above the recommended daily 90 morphine milligram equivalents (MME). At this high dose there is a potential for abuse and diversion.
  - ii. The daily dose of Methadone and short acting morphine sulfate (up to 90 mg every four (4) hours) prescribed to Patient 3 far exceed the recommended daily MME.
  - iii. Respondent continued to prescribe Xanax to Patient 5 even though the patient suffered two overdoses within a

- fourteen (14) month period, and despite several requests by pain management to lower the dose of Xanax.
- iv. Respondent continues to prescribe opiates to Patient 7 despite several hospital admissions where drug abuse is confirmed in the records.
- (b) The Respondent failed to prescribe opioids only in needed quantities and durations and taper or reduce the dosages (Patients 2, 3, 5, 6, 7, 9).
- (c) The Respondent failed to avoid prescribing opioid pain medication and benzodiazepines concurrently whenever possible (Patients 6, 9).
- i. The Respondent prescribed very high doses of opiates and benzodiazepines for Patient 9. Records listed Oxycodone 240 mg twice a day, Valium 10-20 mg three times a day, and Oxycodone 15 mg every 4 hours as needed
- (d) The Respondent failed to ensure that each patient was involved in a comprehensive pain management plan (Patients 3, 5, 6, 7, 9).
- i. Respondent notes that he will refer Patient 6 for pain management consultation, however there is no evidence that this ever occurred.

- ii. There is no documentation that the Respondent referred Patient 3 to a mental health specialist to explore other approaches to her pain.

### CONCLUSIONS OF LAW

Based on the Findings of Fact, Disciplinary B of the Board concludes as a matter of law that the Respondent failed to meet the appropriate standards for the delivery of quality medical care, in violation of Health Occ. § 14-404(a)(22).

### ORDER

It is thus by Disciplinary Panel B 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 of **ONE (1) year**.<sup>2</sup> During probation, the Respondent shall comply with the following terms and conditions of probation:

- (1) Within **SIX MONTHS**, the Respondent is required to take and successfully complete courses in; (a) appropriate prescribing practices for opioids and benzodiazepines; and (b) medical documentation/recordkeeping. The following terms apply:
  - (a) It is the Respondent's responsibility to locate, enroll in and obtain the disciplinary panel's approval of the courses before the courses are begun;
  - (b) The disciplinary panel will accept a course taken in person or over the internet;

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<sup>2</sup> If the Respondent's license expires during the period of probation, the probation and any conditions will be tolled.

- (c) The Respondent must provide documentation to the disciplinary panel that the Respondent has successfully completed the courses;
  - (d) The courses may not be used to fulfill the continuing medical education credits required for license renewal;
  - (e) The Respondent is responsible for the cost of the courses.
- (2) The Respondent may be subject to a chart and/or peer review conducted by the disciplinary panel or its agents, in the Panel's discretion, as follows:
- (a) the Respondent shall cooperate with the peer review process;
  - (b) the disciplinary panel, in its discretion, may change the focus of the chart and/or peer review if the Respondent changes the specialty of his practice;
  - (c) if the disciplinary panel, upon consideration of the chart and/or peer review and the Respondent's response, if any, determines that the Respondent is meeting the standard of quality care in his or her practice, the disciplinary panel shall consider the peer review condition of the Consent Order met;
  - (d) a peer and/or chart review indicating that the Respondent has not met the standard of quality care and/or has failed to keep adequate medical records may be deemed, by a disciplinary panel, a violation of probation and/or a violation of Health Occ. § 14-404(a)(22) and/or (40).
- (3) The disciplinary panel may issue administrative subpoenas to the Maryland Prescription Drug Monitoring Program on a quarterly basis for the Respondent's Controlled Dangerous Substances ("CDS") prescriptions. The administrative subpoenas will request the Respondent's CDS prescriptions from the beginning of each quarter; and it is further

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

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

**ORDERED** that, after the Respondent has complied with all terms and conditions of probation and the minimum period of probation imposed by the Consent Order has passed, the Respondent may submit to the Board a written petition for termination of probation. After consideration of the petition, the probation may be terminated through an order of the disciplinary panel. The Respondent may be required to appear before the disciplinary panel to discuss his or her petition for termination. The disciplinary panel may grant the petition to terminate the probation, through an order of the disciplinary panel, if the Respondent has complied with all probationary terms and conditions and there are no pending complaints relating to the charges; 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, or suspend 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) and Gen. Prov. § 4-333(b)(6).

03/10/2023  
Date

## *Signature On File*

Christine A. Farrelly  
Executive Director  
Maryland State Board of Physicians

### CONSENT

I, Russell R. De Luca, 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.

3/2/2023

Date

***Signature On File***

  
Russell R. De Luca, M.D.  
Respondent

**NOTARY**

STATE OF Maryland

CITY/COUNTY OF Anne Arundel

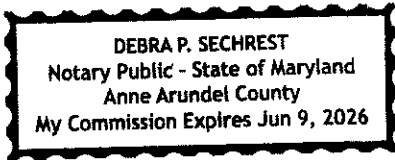
I HEREBY CERTIFY that on this 8<sup>th</sup> day of March, 2023, before me, a Notary Public of the foregoing

State and City/County, did personally appear Russell R. De Luca, M.D., and made oath in due form of law that signing the foregoing Consent Order was his voluntary act and deed.

AS WITNESSTH my hand and seal.

Debra P. Sechrest

Notary Public



My commission expires: June 9, 2026