

IN THE MATTER OF

*

BEFORE THE

DONOVAN B. PARKES, M.D.

*

MARYLAND STATE

Respondent

*

BOARD OF PHYSICIANS

License Number: D34730

*

Case Number: 2219-0152B

* * * * *

CONSENT ORDER

On September 30, 2020, Disciplinary Panel B (“Panel B”) of the Maryland State Board of Physicians (the “Board”) charged **DONOVAN BALMAIN PARKES, M.D.**, (“the Respondent”), License Number D34730, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 14-101 *et seq.* (2014 Repl. Vol. & 2019 Supp.).

The pertinent provisions of the Act under Health Occ. § 14-404(a) provide as follows:

- (a) 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; [and]

...

- (40) Fails to keep adequate medical records as determined by appropriate peer review [.]

On November 18, 2020, Panel B was convened as a Disciplinary Committee for Case Resolution (“DCCR”) in this matter. Based on 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, the Respondent was and is licensed to practice medicine in the State of Maryland. The Respondent was initially licensed to practice medicine in Maryland on February 19, 1987, under license number D34730. The Respondent’s license is presently active and expires on September 30, 2021.
2. The Respondent owns and operates an urgent care center in Baltimore County, Maryland where he practices emergency medicine. The Respondent maintains hospital privileges at a Hospital in Baltimore City.
3. On or about January 9, 2019, Board staff received a complaint (the “Complaint”) from the Baltimore County Police Department alleging that the Respondent had been overprescribing controlled dangerous substances (“CDS”) to a patient (“Patient 5”)¹.

¹ To ensure confidentiality and privacy, the names of individuals, patients, and institutions involved in this case are not disclosed in this Consent Order.

4. Based on the Complaint the Board opened an investigation.

II. Board Investigation

5. In furtherance of its investigation, the Board conducted a drug survey, subpoenaed ten patient medical records from the Respondent, including Patient 5, interviewed the Respondent, and obtained a written response to the Complaint from the Respondent.
6. On or about October 1, 2019, Board staff conducted an under-oath interview with the Respondent. In his interview, the Respondent stated that his practice has approximately 6,000 patients and while he informs his patients that he “does not really do primary care,” many of them come to him for that purpose. The Respondent further stated that most of his patients present pain or cold and flu symptoms. The Respondent also stated that his practice does not require patients to bring prior medical records or imaging studies with them but if they have recently been treated elsewhere they will be asked to consent to release of records for that prior treatment. He further stated that he informs his patients that he does not want to treat chronic pain but nonetheless some of them repeatedly return for that purpose.
7. When asked about Patient 5, the Respondent characterized her as “very manipulative,” and stated that she has a number of serious health issues and has been referred for surgery but elects not to pursue it. Due to Patient 5’s disinterest in pursuing avenues of improvement the Respondent discharged her from his practice in 2018.

8. On or about November 4, 2019, Board staff sent the ten patient medical records and other relevant materials to a peer review entity to be reviewed by certified pain management physicians (the “Peer Reviewers”). On or about February 28, 2020 Board staff received the peer review reports in which the Peer Reviewers opined that the Respondent did not meet the appropriate standards for the delivery of quality medical and surgical care in eight of the ten cases. The Peer Reviewers further opined that the Respondent did not maintain adequate medical records in nine of the ten cases.
9. On or about March 18, 2020, Board staff received the Respondent’s written supplemental response in which he offered his reply to the peer review reports.

III. Summary of Peer Review Reports

10. The Peer Reviewers found that the Respondent:
 - a. Utilized high-dose opioid therapy in the absence of physical examination or imaging studies suggesting such a need (Patients 1, 4, 7, 8);
 - b. Failed to utilize random urine drug screening (“UDS”) for monitoring and assessment (Patients 1, 2, 5, 6, 7, 8, 9);
 - c. Failed to follow-up on aberrant UDS results (Patients 4, 5);
 - d. Failed to utilize signed opioid agreements (Patients 1, 2, 4, 5, 7, 8, 9);
 - e. Inappropriately prescribed opioids for long-term headache relief (Patient 2);
 - f. Failed to consider or optimize alternative modalities of pain relief (Patients 2, 4, 5, 6, 7, 8, 9);
 - g. Failed to address aberrant patient behavior (Patients 3, 10);
 - h. Failed to review Prescription Drug Monitoring Program (“PDMP”) reports periodically for compliance (Patients 1, 2, 4, 6, 7, 9);
 - i. Failed to establish and implement standard procedures for patients receiving long-term CDS (Patients 2, 5, 8);
 - j. Failed to address patterns of behavior consistent with opioid use disorder (Patient 4);
 - k. Inappropriately prescribed CDS to a patient with multiple comorbidities and risk factors (Patient 5);

- l. Failed to review previous provider records that indicated the patient was not an appropriate candidate for opioids and failed to make appropriate referral to mental or behavioral health (Patient 5);
- m. Inappropriately prescribed opioids concurrently with benzodiazepines (Patient 1, 5, 7);
- n. Failed to utilize opioid risk assessment evaluation (Patients 5, 6, 8, 9, 10).

CONCLUSION OF LAW

Based on the Findings of Fact, Disciplinary Panel B of the Board concludes as a matter of law that the Respondent failed to meet the standard of care for the delivery of quality medical care, in violation of Health Occ. § 14-404(a)(22) and failed to keep adequate medical records as determined by appropriate peer review, in violation of Health Occ. § 14-404(a)(40).

ORDER

It is thus by an affirmative vote of a majority of a quorum of 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 **TWO YEARS**.² During probation, the Respondent shall comply with the following terms and conditions of probation:

- (1) Within **SIX (6) MONTHS**, the Respondent is required to take and successfully complete courses in (1) the appropriate prescribing of opioid medications and (2) record keeping. 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 course is begun;

² If the Respondent's license expires while the Respondent is on probation, the probationary period and any probationary conditions will be tolled.

- (b) the disciplinary panel will accept a course taken in person or over the internet during the state of emergency;
 - (c) the Respondent must provide documentation to the disciplinary panel that the Respondent has successfully completed the courses;
 - (d) the course may not be used to fulfill the continuing medical education credits required for license renewal; and
 - (e) the Respondent is responsible for the cost of the courses.
- (2) The Respondent is **PROHIBITED** from prescribing or dispensing all **opioids** until the Board is provided with evidence of his completion of the Board-approved opioid prescribing course;
- (3) The Respondent shall be subject to supervision for opioid prescribing³ by a disciplinary panel-approved supervisor who is board-certified in pain medicine as follows:
- (a) within **30 CALENDAR DAYS** of the effective date of this Consent Order, the Respondent shall provide the disciplinary panel with the name, pertinent professional background information of the supervisor whom the Respondent is offering for approval, and written notice to the disciplinary panel from the supervisor confirming his or her acceptance of the supervisory role of the Respondent and that there is no personal or professional relationship with the supervisor;
 - (b) the Respondent's proposed supervisor, to the best of the Respondent's knowledge, should not be an individual who is currently under investigation, and has not been disciplined by the Board within the past five years;
 - (c) if the Respondent fails to provide a proposed supervisor's name within 30 calendar days from the effective date of the order, the Respondent's license shall be automatically suspended from the 31st day until the Respondent provides the name and background of a supervisor;
 - (d) the disciplinary panel, in its discretion, may accept the proposed supervisor or request that the Respondent submit a name and professional background, and written notice of confirmation from a different supervisor;

³ If the Respondent is not practicing medicine, the supervision shall begin when the Respondent resumes the practice of medicine and the disciplinary panel has approved the proposed supervisor. The Respondent shall submit the name of a proposed supervisor within 30 days of resuming the practice of medicine and shall be subject to supervision by a disciplinary panel approved supervisor upon the return to the practice of medicine.

- (e) the supervision begins after the disciplinary panel approves the proposed supervisor;
- (f) the disciplinary panel will provide the supervisor with a copy of this Consent Order and any other documents the disciplinary panel deems relevant;
- (g) the Respondent shall grant the supervisor access to patient records selected by the supervisor from a list of all patients, which shall, to the extent practicable, focus on the type of treatment at issue in the Respondent's charges;
- (h) if the supervisor for any reason ceases to provide supervision, the Respondent shall immediately notify the Board and shall not practice medicine beyond the 30th day after the supervisor has ceased to provide supervision and until the Respondent has submitted the name and professional background, and written notice of confirmation, from a proposed replacement supervisor to the disciplinary panel;
- (i) it shall be the Respondent's responsibility to ensure that the supervisor:
 - (1) reviews the records of **seven** patients each month, such patient records to be chosen by the supervisor and not the Respondent;
 - (2) meets in-person with the Respondent at least once each month and discuss in-person with the Respondent the care the Respondent has provided for these specific patients;
 - (3) be available to the Respondent for consultations on any patient;
 - (4) maintains the confidentiality of all medical records and patient information;
 - (5) provides the Board with quarterly reports which detail the quality of the Respondent's practice, any deficiencies, concerns, or needed improvements, as well as any measures that have been taken to improve patient care; and
 - (6) immediately reports to the Board any indication that the Respondent may pose a substantial risk to patients;
- (j) the Respondent shall follow any recommendations of the supervisor;
- (k) if the disciplinary panel, upon consideration of the supervisory reports and the Respondent's response, if any, has a reasonable basis to believe that the Respondent is not meeting the standard of quality care or failing to keep adequate medical records in his or her practice, the disciplinary panel may find a violation of probation after a hearing; and it is further

ORDERED that the Respondent shall not apply for early termination of probation; 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 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 petition for termination. The disciplinary panel may grant the petition to terminate the probation through an order of the disciplinary panel if there are no pending complaints relating to the charges; and it is further

ORDERED that a violation of probation constitutes a violation of the 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 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 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 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 Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; 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 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* Md. Code Ann., Health Occ. §§ 1-607, 14-411.1(b)(2) and Gen. Prov. § 4-333(b)(6).

12/22/2020
Date

Signature on File

Christine A. Farrelly, Executive Director

CONSENT

I, Donovan B. Parkes, 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.

12/14/25
Date

Signature on File

Donovan B. Parkes, M.D.

NOTARY

STATE OF MARYLAND

CITY/COUNTY OF CARROLL

I HEREBY CERTIFY that on this 14th day of December 2020, before me,
a Notary Public of the foregoing State and City/County, personally appeared Donovan B.
Parkes, M.D., and made oath ~~in due form of law~~ that signing the foregoing Consent Order
was his voluntary act and deed. DS

AS WITNESSETH my hand and notarial seal.



Notary Public



My Commission expires: NOV 2, 2023