

IN THE MATTER OF

*

BEFORE THE

CHRISTIAN T. EVANS, M.D.

*

MARYLAND STATE

Respondent

*

BOARD OF PHYSICIANS

License Number: D40696

*

Case Number: 2218-0247B

* * * * *

CONSENT ORDER

On August 14, 2019, Disciplinary Panel B (“Panel B”) of the Maryland State Board of Physicians (the “Board”) charged **CHRISTIAN T. EVANS, M.D.** (the “Respondent”), License Number D40696, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 14-101 *et seq.* (2014 Repl. Vol. & 2018 Supp).

Panel B charged the Respondent with violating the following provision of the Act under Health Occ. § 14-404:

(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:

(3) Is guilty of:

(ii) Unprofessional conduct in the practice of medicine[.]

One form of unprofessional conduct in the practice of medicine is “disruptive behavior.” “Disruptive physician behavior” has been addressed by The Joint Commission and the American Medical Association (“AMA”).

JOINT COMMISSION SENTINEL EVENT ALERT, 2008

On July 9, 2008, The Joint Commission issued a Sentinel Event alert entitled “Behaviors that Undermine a Culture of Safety,” which stated in pertinent part:

Intimidating and disruptive behaviors can foster medical errors . . . contribute to poor patient satisfaction and to preventable adverse outcomes . . . increase the cost of care . . . and cause qualified clinicians, administrators and managers to seek new positions in more professional environments . . . Safety and quality of patient care is dependent on teamwork, communication, and a collaborative work environment. To assure quality and to promote a culture of safety, health care organizations must address the problem of behaviors that threaten the performance of the health care team.

Intimidating and disruptive behaviors include overt actions such as verbal outbursts and physical threats, as well as passive activities such as refusing to perform assigned tasks or quietly exhibiting uncooperative attitudes during routine activities. Intimidating and disruptive behaviors are often manifested by health care professionals in positions of power. Such behaviors include reluctance or refusal to answer questions, return phone calls or pages; condescending language or voice intonation; and impatience with questions . . . Overt and passive behaviors undermine team effectiveness and can compromise the safety of patients . . . All intimidating and disruptive behaviors are unprofessional and should not be tolerated.^{1,2}

AMA OPINION 9.045, JUNE 2000

AMA Opinion 9.045, entitled, *Physicians with Disruptive Behavior*, adopted in June 2000, states in pertinent part:

...

- (1) Personal conduct, whether verbal or physical, that negatively affects or that potentially may negatively affect patient care constitutes disruptive behavior. (This includes but is not limited to conduct that

¹ In 2011, The Joint Commission revised the term “disruptive behavior” to “behavior or behaviors that undermine a culture of safety.”

² In 2016, The Joint Commission noted that “while the term ‘unprofessional behavior’ is preferred instead of ‘disruptive behavior,’ the suggested actions in this alert remain relevant.”

interferes with one's ability to work with other members of the health care team.) However, criticism that is offered in good faith with the aim of improving patient care should not be construed as disruptive behavior.

AMA OPINION 9.4.4, JUNE 2016

AMA Code of Medical Ethics: Professional Self-Regulation Opinion 9.4.4, adopted in June 2016, pertaining to Physicians with Disruptive Behavior, states in pertinent part:

The importance of respect among all health professionals as a means of ensuring good patient care is foundational to ethics. Physicians have a responsibility to address situations in which individual physicians behave disruptively, that is, speak or act in ways that may negatively affect patient care, including conduct that interferes with the individual's ability to work with other members of the health care team, or for others to work with the physician.

On October 30, 2019 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, and Order.

FINDINGS OF FACT

Panel B finds:

I. Background/Licensing Information

1. At all times relevant to this Consent Order, the Respondent was and is a physician licensed to practice medicine in the State of Maryland. The Respondent was initially licensed to practice medicine in Maryland on October 1, 1990, under License Number D40696. The Respondent's Maryland medical license is active through September 30, 2020.

2. The Respondent is board-certified in radiology.

3. At all times relevant to this Consent Order, the Respondent practiced at a health care facility (the "Facility")³ located in Dorchester County, Maryland.

II. The Complaint

4. The Board initiated an investigation of the Respondent after receiving a Mandated 10-Day Report (the "Report") from the Facility, which stated that it investigated the Respondent after two female Facility staff persons reported that he sent inappropriate and unwelcome electronic messages to them and made similar comments to them in person. The Facility reported that its investigation determined that the Respondent violated its sexual harassment policy and engaged in unprofessional conduct. The Facility further reported that on his last day of work there, the Respondent telephoned one of the above staff persons, used an obscene epithet against her and then hung up the telephone. The Facility stated that the staff person who received the call was "clearly and understandably distraught," and that the Respondent's actions were "inappropriate behavior for anyone, much less a physician."

III. Board Investigation

Facility Investigation

5. As part of its investigation, the Board reviewed the Facility's investigation of this matter, which involved interviews of the two Facility staff persons, the Respondent

³ To maintain confidentiality, the names of health care facilities and Facility staff persons will not be identified in this Consent Order. The Respondent is aware of the identity of all facilities and Facility staff persons referenced herein.

and other staff persons with knowledge of this matter. In its Investigation Report, the Facility stated that a female staff person (“Employee A”) contacted the Facility’s Human Resources (“HR”) Department on October 19, 2017, to report her concerns about the Respondent. On October 25, 2017, Employee A met with Facility representatives and filed a formal complaint against the Respondent, alleging that he made unwelcome, sexually suggestive comments to her in person, via text to her personal telephone, and through messages on Facebook. Employee A stated that the Respondent’s actions made her feel harassed, intimidated and fearful. After Employee A filed her complaint, a second female staff person (“Employee B”) came forward and stated that the Respondent contacted her and also made overly personal comments to her about her appearance, which made her feel threatened when she would not reply to his Facebook messages. During the Facility investigation, Employees A and B produced texts and Facebook messages from the Respondent in support of their allegations.

6. The Facility reported that it interviewed another female staff person (“Employee C”) who stated that several years before, the Respondent contacted her by text and “asked her out on a date,” after which Employee C’s spouse contacted the Respondent and instructed him not to contact her.

7. The Facility reported that it interviewed the Respondent, who denied acting inappropriately towards the Employees. When confronted with the texts the Employees received, the Respondent at first stated that someone must have “hacked his cellphone” when he left it unattended. The Facility’s investigation interviewed several Facility staff persons who did not report seeing the Respondent’s telephone unattended, however. The

Respondent later claimed that one of the staff persons fraudulently created the messages using a cellphone application.

8. The Facility reported that after meeting with the Respondent on November 8, 2017, Facility representatives instructed him to cease and desist from contacting Facility employees for the duration of its investigation. On November 12, 2017, however, the Respondent contacted another female staff person (“Employee D”) by email, in violation of this directive. Employee D did not respond to the Respondent but immediately contacted the Facility’s HR Department. Employee D reported that the Respondent continued to attempt to contact Employees A and B despite the Facility’s specific request that he cease having all contact with them.

9. After the HR meeting, the Facility transferred the Respondent to one of its other worksites where he practiced until late-April 2018, when he resigned. On the Respondent’s last day of work, April 27, 2018, the Respondent telephoned Employee B, who was on duty at the Facility and stated, “go f**k yourself” and hung up the telephone. According to the Facility’s Investigation Report, Employee B was “clearly and understandably distraught” and immediately reported him to Facility representatives.

Respondent’s written response

10. The Board requested that the Respondent provide a written response to the allegations the Facility cited in its Report. The Respondent submitted a response, dated June 5, 2018, in which he denied sexually harassing any individual or commenting on anyone’s appearance, except once or twice when a staff person was dressed inappropriately or slovenly for work. He further stated that although he was Facebook friends and had

communicated outside of work with several staff persons, his communications dealt with a beach condominium or when checking on them when they were ill.

11. With respect to Employee A's complaint, the Respondent claimed that she made her complaint against him after he reported her about a work deficiency. The Respondent stated that Employee A made a retaliatory comment to him when he reported her. The Respondent further stated that he found Employee A in possession of his cellphone, which he had left charging in a common area.

12. The Respondent did acknowledge one Facebook exchange with Employee B. In this exchange, he responded to Employee B, who sent him a text with a "thumbs-up" emoji, stating, "always nice to hear from beautiful women." He stated that he "apologized if he made her uncomfortable." The Respondent stated, "I never intentionally engaged in sexually inappropriate behavior" but also stated, "in retrospect, I made the mistake of being too friendly and collegial with the techs as a group. In my new employment, I have no intention of creating personal relationships outside of the work and I have and will remain strictly professional." The Respondent did admit that nicknames such as "Blondie," "Dear" and "Sweetheart," should not be used in the workplace.

13. Board staff also interviewed several staff persons who were involved in this matter.

Employee A

14. In her interview, Employee A confirmed that on October 19, 2017, she made a complaint to the Facility about the Respondent, stating that she felt harassed, intimidated, and fearful that he would retaliate against her. Employee A stated that the Respondent:

made inappropriate comments about her clothes in front of patients; called her “Blondie” and “Sweetheart” in front of patients; sent her unwelcome, inappropriate late-night messages through Facebook Messenger and text messages; produced a Facebook Messenger communication in which the Respondent said, “I probably shouldn’t be saying this but you looked pretty hot yesterday Blondie!”; and asked if she noticed that he becomes “excited” when she enters his office.

15. Employee A stated that the Respondent began sending her inappropriate messages in the summer of 2015, sometimes as late as 2:00 a.m. She stated, “when they first started, it was a lot. It would be daily, weekly . . . I know...Late at night and just the things he would say. And then, usually, he’d follow up the next morning and apologize for sending them.” She stated that the Respondent’s Facebook messages were usually about her clothing and that she had asked him to stop multiple times.

16. Employee A stated that in response to a message where the Respondent told her she looked “pretty hot” that day, she informed the Respondent that she was not responding because it was awkward and her husband would not appreciate it. She stated that the Respondent then apologized and said that he had meant it as a compliment. Employee A stated that she had deleted a lot of the Respondent’s messages because she did not want her husband to see them. Employee A stated that on another occasion, the Respondent messaged her and asked, “did you notice I was excited in my pants when you came in?” Employee A stated that the Respondent would often make crude jokes and mentioned wanting to open a separate radiology practice of his own with topless technicians. Employee A stated, “...I got to the point when he was scheduled here, I was

physically uncomfortable. I didn't make eye contact with him. I did not talk to him. I did not go to his office." In response to the Respondent's claim that an incident occurred with Employee A regarding an error on a CT scan and her making a retaliatory comment/threat, Employee A denied making the comment or that the incident occurred.

Employee B

17. Employee B confirmed that she also filed a complaint to the Facility about the Respondent, stating that she felt threatened and unsafe around him due to his unwelcome, overly personal comments about her appearance. Employee B stated that she felt threatened by the Respondent's comments to her when she would not reply to his messages and that she feared retaliation. Employee B alleged that the Respondent: sent her inappropriate text messages after hours; sent her a Facebook message on August 9, 2015 at 12:03 a.m., stating, "Wow, your pic. If we weren't married . . . damn!"; replied to a message, consisting of a "thumbs-up" emoji she accidentally sent to him on October 25, 2017, by stating, "It's always nice to hear from beautiful women"; asked her whether she was planning to visit a nude bar during a trip to Key West and then described how he would like to open an imaging center where female radiology technicians would work topless; made inappropriate comments to radiology employees at another Facility worksite; and disclosed personal issues to her.

18. Employee B stated that she began working with the Respondent in 2012 and was immediately taken aback by his demeanor. Specifically, she stated that the Respondent made "a lot of dirty jokes mostly related to women in a sexual way, just comments, in general commenting on even patients sometimes about their attractiveness or lack thereof."

19. Employee B stated that the Respondent once made a comment to her about opening a new imaging facility employing only “topless” technicians and told her that because she was a little older, he would pay for her reconstructive surgery before hiring her.

20. Employee B stated that the Respondent messaged her on Facebook extensively over the years. She further stated that the “late evening messages were always the more, you know, where I felt like he was coming on to me and I feel like there was probably alcohol involved. I mean, nobody is usually up midnight, 1:00, 2:00, 3:00 in the morning messaging somebody.” Employee B recalled an instance in the summer of 2015 when the Respondent made a comment to her about his personal life. She stated that this made her feel very uncomfortable because the Respondent made this comment while she and the Respondent were alone behind a locked door.

21. Employee B stated that she noticed that Employee A was much more of a “target” over the past couple of years, causing Employee A to have a change in her comfort level and demeanor. Employee B stated that she knew that Employee A asked the Respondent “many, many times to please stop, that she’s married, that it’s uncomfortable.”

22. Employee B further stated that on the Respondent’s last day of work, the Respondent placed a call to the CT department where she was working and stated, “go f**k yourself,” and then hung up. Employee B stated that this frightened her, and she immediately contacted HR and Facility administration, which made sure that security escorted her out to her car that day. She stated, “I’m worried that he will try and contact

me outside of work because I feel like he's just lashing out at—instead of getting help and carrying on, he's just fixated on lashing out.”

Employee C

23. Employee C stated that she worked with the Respondent for a significant time period and that in or around 2014, the Respondent texted her around midnight and stated that he thought she was attractive for all of these years. Employee C stated that she did not respond immediately to his text. Employee C stated that the Respondent texted her the next morning to apologize and stated that he had been “extremely drunk.” Employee C instructed the Respondent not to contact her any further. She stated that she had shared the Respondent's texts with her husband, who contacted the Respondent and told him to stop communicating with her.

Employee D

24. Employee D has a supervisory role at the Facility. She stated that Employee A approached her and informed her that the Respondent had inappropriate conversations with her that were making her feel uncomfortable, typically through Facebook Messenger. Employee D stated that she advised Employee A to contact the Facility's HR Department. Employee D stated that after Employees A and B reported the Respondent's actions, they did express concern and uneasiness that they would face retaliation.

25. Employee D addressed the Respondent's claim that Employee A made a threatening comment to him after he criticized a radiographic study she performed. Employee D stated that she did not remember hearing, seeing or witnessing such a threat.

Employee D stated that the Respondent contacted her via Facebook regarding work matters.

26. Employee D also recounted that when she was working at another Facility worksite, the Respondent approached her and stated, “he was going to come out of this just fine and for [her] to tell the girls that they haven’t ruined him.”

Employee E

27. Employee E took part in the Facility’s investigation of the Respondent. After meeting with Employees A and B, Employee E gathered a list of staff members who could corroborate the details of their complaints. Through her investigation, Employee E confirmed that the Respondent sent suggestive and overly personal messages to several staff members and also stated that she viewed electronic versions of the messages that both Employees A and B produced and verified that they had not been photo shopped. Employee E also stated that she interviewed the Respondent, who initially denied sending any texts or Facebook messages. Employee E confirmed that the Respondent initially said that he never spoke to any staff persons after hours unless he had a medical question. Employee E stated that the Respondent later alleged that he left his cellphone out in a common work area for charging and that people were sending texts from his cellphone because it was accessible. Employee E stated that she was able to discredit that claim by speaking to at least six staff persons who work in that area who stated that the Respondent’s cellphone never left his person and was never left in a common area to charge. In addition, Employee E stated that at a later meeting, the Respondent alleged that Employee A had used an “app” to create these messages. Employee E stated that although the Respondent suggested that

Employee A should have her cellphone forensically searched to determine if she had fraudulently created the messages, he declined to have his own cellphone examined for this purpose.

Employee F

28. Employee F is in a senior management position at the Facility. Employee F stated that Employee B contacted him by telephone on April 27, 2018 and was “very tearful and concerned” about a telephone call she had just received from the Respondent, “who used foul language.” Employee F concluded that the Respondent’s telephone call to Employee B constituted “retribution” and was the deciding factor in the Facility’s submission of its Report to the Board. Employee F stated that the Respondent continued to communicate with him after the Respondent left his position at the Facility. Employee F stated that his last communication with the Respondent was through an email the Respondent sent him on May 22, 2018 at 12:05 pm. This email, with the subject line of “Me,” states the following:

[Employee F] I swear I did not make that phone call to [Employee B].
Now I am up before the Board of Physicians. I am at wit’s end. I beg
you to help me with the Board. PLEASE!

(capitalization, punctuation as in original)

Respondent’s interview

29. On December 18, 2018, Board staff interviewed the Respondent. The Respondent denied that he sent any inappropriate messages with the exception of one to Employee B, which he stated he realized “might be inappropriate.” The Respondent stated that the only time he would have communicated with Employee A outside of work was to

offer her sports tickets or to discuss a condominium rental. The Respondent stated that he did not “recall the conversation” where Employee A instructed him not to send her further messages.

30. When asked how the messages appeared to be sent from his cellphone, he claimed that on two occasions in the summer of 2017, he observed Employee A with his cellphone, which he left charging in a common area. He stated that he did not report this to the hospital. When questioned about how Employee A would have accessed his cellphone, the Respondent stated that he believed she knew his cellphone password, which was his anniversary date, a date he claimed many in his workplace knew. He also claimed that his Facebook account had been hacked on three separate occasions.

31. The Respondent admitted that he called Employee A “Blondie” and “Sweetheart,” stating, “I realized retrospectively that [it was] inappropriate” to use those terms when addressing her. With respect to using the name, “Blondie,” the Respondent stated, “I never was told by [Employee A] or anyone else that it was offensive.” The Respondent stated that when he was in the military, he used the term “Sweetheart” and “never had anyone say that it was inappropriate” to him.

32. The Respondent stated that he communicated with Employee B when he had extra sports tickets that he offered to her via Facebook message. The Respondent acknowledged sending the message to Employee B, “it’s always nice to hear from beautiful women.” The Respondent stated that he sent Employee B further texts after this exchange. The Respondent stated that he sent one text that stated, “wow, I’m going crazy because

[she] wouldn't answer me back when I apologized," but denied his follow up message that read, "why are you screwing with me?"

33. When questioned about statements the Respondent allegedly made to Employee B about opening a "topless" imaging center, the Respondent denied making such statements and claimed that any comments were in the context of giving advice to Employee B on her planned trip to Key West, Florida. The Respondent claimed that he actually told Employee B to avoid "all the new bars and the transvestite bars" and the areas where "heavy partying goes on." The Respondent stated that in fact, "the conversation happened in the context of me helping her find a place where she . . . and her children would not be exposed to some of the badder (sic) elements of Key West."

34. The Respondent acknowledged that he was instructed not to have contact with any of the staff persons following his meeting with the HR Department but stated that despite this, he sent an email to Employee E.

35. The Respondent also acknowledged that even though he was instructed not to contact staff persons, he called Employee B on his last day and told her to "go f**k herself." He stated, "So yes, it was a terrible thing to do. I extremely regret doing that. I would not have done it had I not been egged on, whatever, not that that's an excuse. I'm an adult. But, yes, I did that." The Respondent stated, "I can also say that there was an atmosphere at the Facility in that department from the beginning that was too collegial between myself and the technologists and I think it lent itself to, at times, a less than professional atmosphere. And I will admit that it's my fault."

36. The Respondent further stated, “And I believe under the letter of the law I committed harassment . . . but as to the other allegations, the sexual, the supposed sexual messages, the text messages . . . I emphatically deny that.”

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, Panel B concludes that the Respondent engaged in unprofessional conduct in the practice of medicine, in violation of Health Occ. § 14-404(a)(3)(ii).

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 period of **TWO (2) YEARS**.⁴ During the probation, the Respondent shall comply with the following terms and conditions of probation:

1. The Respondent shall enroll in MPRP as follows:
 - (a) Within 5 business days, the Respondent shall contact MPRP to schedule an initial consultation for enrollment;
 - (b) Within 15 business days, the Respondent shall enter into a Participant Rehabilitation Agreement and Participant Rehabilitation Plan with MPRP;
 - (c) the Respondent shall fully and timely cooperate and comply with all MPRP’s referrals, rules, and requirements, including, but not limited to, the terms and conditions of the Participant Rehabilitation Agreement(s) and Participant Rehabilitation Plan(s) entered with MPRP, and shall fully participate and

⁴ If the Respondent’s license expires during the period of probation, the probation and any conditions will be tolled.

comply with all therapy, treatment, evaluations, and screenings as directed by MPRP;

- (d) the Respondent shall sign and update the written release/consent forms requested by the Board and MPRP, including release/consent forms to authorize MPRP to make verbal and written disclosures to the Board and to authorize the Board to disclose relevant information from MPRP records and files in a public order. The Respondent shall not withdraw his release/consent;
 - (e) the Respondent shall also sign any written release/consent forms to authorize MPRP to exchange with (i.e., disclose to and receive from) outside entities (including all of the Respondent's current therapists and treatment providers) verbal and written information concerning the Respondent and to ensure that MPRP is authorized to receive the medical records of the Respondent, including, but not limited to, mental health and drug or alcohol evaluation and treatment records. The Respondent shall not withdraw his release/consent;
 - (f) the Respondent's failure to comply with any of the above terms or conditions including terms or conditions of the Participant Rehabilitation Agreement(s) or Participant Rehabilitation Plan(s) constitutes a violation of this Consent Order;
2. Within six (6) months, the Respondent is required to take a one-to-one tutorial in professional workplace behavior. The following terms apply:
- (a) it is the Respondent's responsibility to locate, enroll in and obtain the disciplinary panel's approval of the course before the course is begun;
 - (b) the disciplinary panel will not accept a course taken over the internet;
 - (c) the Respondent must provide documentation to the disciplinary panel that the Respondent has successfully completed the course;

- (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 course.
3. Within six (6) months, the Respondent shall pay a civil fine of \$ 5,000.00. The Payment shall be by money order or bank certified check made payable to the Maryland Board of Physicians and mailed to P.O. Box 37217, Baltimore, Maryland 21297. The Board will not renew or reinstate the Respondent's license if the Respondent fails to timely pay the fine to the Board; 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 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 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 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 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).

11/12/2019

Date

Signature on File

Christine A. Farrelly
Executive Director
Maryland State Board of Physicians

CONSENT

I, Christian T. Evans, 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.

Signature on File

Nov 5, 2019

Date

Christian T. Evans, M.D. /
Respondent

NOTARY

STATE OF Maryland
CITY/COUNTY OF Talbot

I HEREBY CERTIFY that on this 5th day of November 2019, before me, a Notary Public of the foregoing State and City/County, personally appeared Christian T. Evans, M.D., and made oath in due form of law that signing the foregoing Consent Order was his voluntary act and deed.

AS WITNESSETH my hand and notarial seal.

A Miller
Notary Public

My Commission expires: 8/11/2023

