

IN THE MATTER OF	*	BEFORE THE MARYLAND
HAMED ELFEKY, M.D.	*	STATE BOARD OF
Respondent	*	PHYSICIANS
License Number: D51739	*	Case Number: 2224-0018A

* * * * *

CONSENT ORDER

PROCEDURAL BACKGROUND

The Maryland Board of Physicians (the "Maryland Board") received information that Hamed Elfeky, M.D., (the "Respondent") License Number D51739, was disciplined by the Virginia Board of Medicine (the "Virginia Board"). In an Order dated July 17, 2023, the Virginia Board disciplined the Respondent by reprimand.

Based on the above referenced Virginia Board sanction, the Maryland Board has grounds to charge the Respondent with violating the following provisions of the Maryland Medical Practice Act (the "Act"), under H. O. § 14-404(a):

- (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:
 - (21) Is disciplined by a licensing or disciplinary authority or convicted or disciplined by a court of any state or country or disciplined by any branch of the United States uniformed services or the Veteran's Administration for an act that would be grounds for disciplinary action under this section,

Disciplinary Panel A ("Panel A") has determined that the acts for which the Respondent was disciplined in Virginia would be grounds for disciplinary action under

H.O. § 14-404(a). The grounds for disciplinary action under H.O. § 14-404(a) are as follows:

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

Based on the action taken by the Virginia, the Respondent agrees to enter into this Consent Order with Panel A, consisting of Procedural Background, Findings of Fact, Conclusions of Law, Order and Consent.

FINDINGS OF FACT

Panel A makes the following findings of fact:

1. At all times relevant hereto, the Respondent was a physician licensed to practice medicine in the State of Maryland. The Respondent was initially licensed in Maryland on or about March 11, 1997.
2. The Virginia Board of Medicine found that the Respondent failed to correctly and/or completely evaluate tissue samples for two separate patients.
3. By Order dated July 17, 2023, the Virginia Board disciplined the Respondent by reprimand.

A copy of the Virginia Order is attached hereto.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, Panel A concludes as a matter of law that the Respondent is subject to discipline under Health Occ. § 14-404(a)(21) for the disciplinary action taken by the Virginia Board against the Respondent for an act or acts that would be grounds for disciplinary action under Health Occ. §14-404(a)(22).

ORDER

It is, thus, by Panel A, hereby:

ORDERED that the Respondent is hereby **REPRIMANDED**; 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).

Signature On File

09/26/2023
Date

Christine A. Farrelly
Executive Director
Maryland Board of Physicians

CONSENT

I, Hamed Elfeky, M.D., acknowledge that I am aware of my right to consult with and be represented by counsel in considering this Consent Order. I have chosen to proceed without counsel and I acknowledge that the decision to proceed without counsel is freely and voluntarily made.

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

9/20/2023
Date

Hamed Elfeky, MD
Respondent

NOTARY

STATE OF Florida

CITY/COUNTY OF Orange

I HEREBY CERTIFY that on this 20th day of September, 2023, before me, a Notary Public of the State and City/County aforesaid, personally Hamed Elfeky, MD, and made oath in due form of law that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS my hand and notarial seal.

see attachment
Notary Public

Madelene Cordero Bernios

My Commission expires: _____

FL Jurat Notary Certificate

Document Name: State Board of Physician Consent Order.
Procedural Background.

STATE OF FLORIDA
COUNTY OF Orange
(County where notarization occurred)

Sworn to (or affirmed) and subscribed by personally appearing before me by physical presence this 20th
day of September, 2023, by, Hamed Eifeky (name of signer(s)).

Madeline Cordero Berrios
(Signature of notary public)
Madeline Cordero Berrios
(Name of notary public)



My commission expires: Oct 7, 2025

Official Seal

Personally known _____ OR
Produced identification X Type of identification produced: FL Driver license.