Paul R. Johnson, M.D.

Date:

Damean W. E. Freas, D.O., Chair Disciplinary Panel B Maryland State Board of Physicians 4201 Patterson Avenue, 4th Floor Baltimore, MD 21215-2299

> Re: Surrender of License to Practice Medicine Paul R. Johnson, M.D. License Number: D52487 (expired) Case Number: 2219-0012B

Dear Dr. Freas and Members of the Disciplinary Panel B,

Please be advised that, pursuant to Md. Code Ann., Health Occ. ("Health Occ.") §14-403 (2014 Repl. Vol. & 2018 Supp.), I have decided to **SURRENDER** my license to practice medicine in the State of Maryland, License Number D52487,¹ 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 on or about July 10, 2018, and August 31, 2018, the Board received a Mandated 10-Day Report from Hospital A notifying the Board that my privileges had been summarily suspended on June 29, 2018, based on a patient incident involving a patient safety issue. In lieu of appealing the suspension of my hospital

¹ My license expired on September 30, 2018; however, pursuant to Health Occ. §14-403, unless a disciplinary panel agrees to accept the surrender of a license, the individual may not surrender a license while the individual is under investigation.

Damean W. E. Freas, D.O. and Members of Disciplinary Panel B RE: Paul R. Johnson, M.D. Letter of Surrender

Page 2

privileges, I voluntarily surrendered my privileges on August 17, 2018. The Board initiated an investigation of my medical practice and two peer reviewers concurred in a review of six patient records, I failed to meet the standard of quality care in three of the cases, and that my documentation was inadequate in all six of the records. I recognize that for all purposes relevant to medical licensure these allegations shall be treated as proven and that these allegations support a conclusion that I violated Md. Code Ann., Health Occ. § 14-404(a)(22) (fails to meet appropriate standards for the delivery of quality medical and surgical care...) and (40) (fails to keep adequate medical records...)

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 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, the National Practitioner Data Bank, and the Healthcare Integrity and Protection 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.* (2016), 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 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 Damean W. E. Freas, D.O. and Members of Disciplinary Panel BRE: Paul R. Johnson, M.D.Letter of Surrender

Page 3

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 have knowingly and willfully waived my right to be represented by an attorney before signing this letter surrendering my license to practice medicine in Maryland. 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.

Signature on File

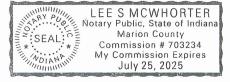
⁻ Paul R. Johnson, M.D.

NOTARY

STATE OF Indiana CITY/COUNTY OF Marion

I HEREBY CERTIFY that on this 24 day of Apric, 2019 before me, a Notary Public of the City/County aforesaid, personally appeared Paul R. Johnson, M.D., and declared and affirmed under the penalties of perjury that the signing of this Letter of Surrender was his voluntary act and deed.

AS WITNESS my hand and Notarial seal.



My commission expires:

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Notary Public

ACCEPTANCE

On behalf of Disciplinary Panel B, on this <u>for day of May</u>, 2019, I, Christine A. Farrelly, accept Paul R. Johnson, M.D.'s **PUBLIC SURRENDER** of his license to practice medicine in the State of Maryland.

Christine A. Farrelly, Executive Director Maryland Board of Physicians Damean W. E. Freas, D.O. and Members of Disciplinary Panel B RE: Paul R. Johnson, M.D. Letter of Surrender

Page 4