

IN THE MATTER OF	*	BEFORE THE
ZINON MARK PAPPAS, M.D.	*	MARYLAND STATE
Respondent	*	BOARD OF PHYSICIANS
License Number: D53871	*	Case Number: 2220-0258 A

\* \* \* \* \*

**CONSENT ORDER**

On August 12, 2021, Disciplinary Panel A (“Panel A”) of the Maryland State Board of Physicians (the “Board”) charged **ZINON MARK PAPPAS, M.D.** (the “Respondent”), License Number D53871, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. §§ 14-101 *et seq.* (2014 Repl. Vol. & 2020 Supp.).

Panel A charged the Respondent with violating the following provision 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 November 3, 2021, Panel A 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 A 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 initially licensed to practice medicine in Maryland on September 8, 1998, under License Number D53871. His license is active through September 30, 2023.

2. The Respondent is board-certified in physical medicine and rehabilitation.

3. The Respondent has partial ownership of a medical practice (the "Practice")<sup>1</sup> that has multiple offices in Maryland. The Respondent primarily practices at the Practice's office in Frederick, Maryland.

4. The Respondent has hospital privileges at one Maryland hospital.

### **II. THE COMPLAINT**

5. On or about March 11, 2020, the Board received a complaint (the "Complaint") dated March 5, 2020, from a patient of the Respondent (the "Complainant"). The Complainant alleged, among other things, that the Respondent improperly prescribed her medications, including controlled dangerous substances ("CDS").

### **III. BOARD INVESTIGATION**

6. The Board opened an investigation into the Complaint. In furtherance of the investigation, the Board subpoenaed prescription records, a series of patient records,

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<sup>1</sup> To maintain confidentiality, the names of individuals and health care facilities will not be identified in this document.

and obtained a peer review of the Respondent's practice. The Board also notified the Respondent of its investigation, directed the Respondent to submit a written response to the allegations in the Complaint, and conducted an under-oath interview with the Respondent.

***Patient Records***

7. By letter dated May 12, 2020, the Board issued the Respondent a subpoena for the medical records for ten (10) specific patients ("Patients 1-10") and requested that he provide a summary of care for Patients 1-10.

8. On or about June 3, 2020, the Board received the medical records and summaries of care for Patients 1-10.

***Peer Review***

9. In furtherance of its investigation, the Board submitted the medical records for Patients 1-10 and related materials to a peer review entity to determine if the Respondent complied with appropriate standards for the delivery of quality medical care and kept adequate medical records. Two peer reviewers, each board-certified in physical medicine and rehabilitation, independently reviewed the materials and submitted their reports to the Board.

10. In their reports the two physician peer reviewers concurred that the Respondent failed to meet appropriate standards for the delivery of quality medical care for four (4) patients.

11. Specifically, the peer reviewers found that for the four (4) patients, the Respondent failed to meet the standard of quality medical care for reasons including, but not limited to, the following areas:

- i. The Respondent did not prescribe naloxone for patients with concurrent benzodiazepine and opiate use and total daily morphine milligram equivalent (“MME”)<sup>2</sup> greater than 50 (Patients 1, 5, 7 and 9).
- ii. The Respondent failed to regularly verify patient compliance through Chesapeake Regional Information System for our Patients (“CRISP”) (Patient 1).

### ***The Respondent’s Response***

12. By letter dated February 11, 2021, the Board provided to the Respondent the peer review reports and the opportunity to submit a written response (the “Supplemental Response”).

13. In the Supplemental Response, the Respondent stated:

- i. I agree with the concern regarding naloxone prescriptions. While I have occasionally prescribed it in the past, for certain patients, I should provide this prescription for all patients taking opioids.
- ii. [My partner at the Practice] and I check CRISP on all patients prescribed opioids every 90 days. Admittedly, I did not check it as regularly as this initially, after CRISP became available. CRISP became available about 3 years ago or so, and in retrospect, I should have been checking it more regularly initially.

### **CONCLUSIONS OF LAW**

Based on the Findings of Fact, Disciplinary Panel A 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).

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<sup>2</sup> MME is a value assigned to each opioid to represent its relative potency by using morphine as the standard comparison. The *Centers for Disease Control Guideline for Prescribing Opioids for Chronic Pain* uses MME to establish recommended opioid dosing and currently recommends using caution when prescribing opioid doses greater than 50 MME per day and avoiding or carefully justifying a decision to increase opioid doses to greater than or equal to 90 MME per day.

**ORDER**

It is thus by Disciplinary Panel A of the Board, hereby:

**ORDERED** that the Respondent is **REPRIMANDED**; 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***

11/29/2021

Date

Christine A. Farrelly, Executive Director  
Maryland State Board of Physicians

CONSENT

I, Zinon Mark Pappas, 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***

11/23/21  
Date

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Zinon Mark Pappas, M.D.  
Respondent

NOTARY

STATE OF Maryland

CITY/COUNTY OF Baltimore County

I HEREBY CERTIFY that on this 23<sup>rd</sup> day of November, 2021, before me, a Notary Public of the foregoing State and City/County, did personally appear Zinon Mark Pappas, 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.

Stephanie Mizansky   
Notary Public

My commission expires: 9/13/2025

