

IN THE MATTER OF

\*

BEFORE THE

LORRIN DAVID MARTIN, M.D.

\*

MARYLAND STATE

Respondent

\*

BOARD OF PHYSICIANS

License No.: D60027

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Case No.: 2221-0052A

\* \* \* \* \*

**CONSENT ORDER**

On September 13, 2021, Disciplinary Panel A (“Panel A”) of the Maryland State Board of Physicians (the “Board”) charged Lorrin David Martin, M.D. (the “Respondent”), License Number D60027, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 14-101 *et seq.* (2014 Repl. Vol. & 2020 Supp.). Panel A charged the Respondent under the following provisions of the Act:

**Health Occ. § 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; [and]

....

(33) Fails to cooperate with a lawful investigation conducted by the Board or a disciplinary panel[.]

On December 1, 2021, Panel A 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 A finds:

#### **Background & Complaint**

1. At all relevant times, the Respondent has been licensed to practice medicine in Maryland. The Respondent was first licensed in Maryland on or about March 26, 2003, under License Number D60027. His license is active through September 30, 2021, subject to renewal.
2. The Respondent is board-certified in internal medicine.
3. On or about September 24, 2020, the Board received an anonymous complaint alleging that the Respondent was prescribing “excessive quantities of opioids” and combinations of opioids and benzodiazepines to one of his patients (“Patient 1”).<sup>1</sup>

#### **Board Investigation**

4. The Board initiated an investigation into the complaint.

#### *Medical Records*

5. As part of its investigation, the Board identified ten patients who received prescriptions for controlled dangerous substances from the Respondent between January 1, 2019, and October 5, 2020 (“Patients 1-10”).
6. On or about November 9, 2020, the Board notified the Respondent about the complaint and issued him a subpoena duces tecum. The subpoena directed the Respondent

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<sup>1</sup> To maintain confidentiality, the names of all patients, witnesses, facilities, and employees will not be disclosed in this document.

to produce to the Board within 10 business days “a complete copy of any and all medical records” for Patients 1-10 that were “in [the Respondent’s] possession or [the Respondent’s] constructive control, whether generated by [the Respondent] or any other health care entity[.]” (Bold font in original.) The subpoena was addressed to Dr. Martin personally and involved medical records from paper, electronic and hybrid charts, spanning decades.

7. On or about November 19, 2020, the Respondent provided a written response to the complaint as well as certain medical records for Patients 1-10. He sent a blank copy of an opioid treatment agreement, which he explained “covers many patient expectations.” The Respondent also said in his response that the Board’s subpoena for medical records “constitutes tens of thousands of pages” and that he was instead providing the Board with records that “constitutes all encounters in our electronic medical record, dating to or in some cases past the dates of my involvement with the patients.”<sup>2</sup> He explained that “these patients have more lab and imaging and miscellaneous records that can be sent if needed.”

8. The Respondent submitted a signed Certification of Medical Records with each patient’s medical record. That Certification stated:

I Lorrin David Martin do hereby certify and solemnly affirm under the penalties of perjury, that to the best of my knowledge, information and belief, the enclosed medical records in response to the attached subpoena are an accurate reproduction of any and all records in my possession or constructive possession and are in compliance with the attached subpoena.

I have personally reviewed the entire medical record and further certify to the best of my knowledge, information and belief,

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<sup>2</sup> The Board subsequently issued a subpoena duces tecum to a medical institution for relevant patient records dated between January 1, 2004 and December 31, 2007, which was prior to the electronic medical records system that the Respondent referenced in his written response.

that I have provided the Maryland Board of Physicians (Board) with the **COMPLETE MEDICAL RECORDS** which include all records pertaining to the care and treatment of the patient [patient name] in my possession or constructive possession and control, including all materials generated by me, or other health care providers, all laboratory reports, all jacket entries and all other entries as kept in the regular course of business for each patient in my medical practice.

I understand that my failure to provide the complete medical records to the Board may constitute failure to cooperate with the Board's lawful investigation and may result in disciplinary action by the Board under the Maryland Medical Practice Act. [Bold, capitals, and underlines in original.]

*Peer Review*

9. On or about March 9, 2021, the Board referred ten patient records obtained from the Respondent and related materials to a peer review entity for review. Two peer reviewers, who were each board-certified in anesthesiology with subspecialty certification in pain medicine, separately reviewed the ten patient records.

10. On or about March 26, 2021, the peer reviewers submitted their reports to the Board. The peer reviewers concurred that the Respondent did not meet the standards for the delivery of quality medical care for eight patients. The peer reviewers cited the following reasons, among others, for their conclusion that the Respondent did not meet the standards for the delivery of quality medical care:

- a. The Respondent did not require that patients sign an opioid treatment agreement despite his continuing to prescribe opioids to these patients (Patients 1, 2, 5, 6, 7, 9, and 10);
- b. The Respondent did not require that patients undergo random pill counts (Patients 1, 2, 5, 6, 7, 8, 9, and 10);
- c. The Respondent did not consider or routinely attempt to refer patients for alternative treatments such as orthopedic injections, physical therapy, or chiropractic interventions (Patients 1, 2, 5, 8, and 9);

- d. The Respondent continued to prescribe and refill opioids in the presence of noncompliant behavior (e.g., discordant urine screens; requesting early refills) with no termination of treatment or attempts to taper the patients off of opioids (Patients 7, 8, 9, and 10);
- e. The Respondent prescribed a combination of high-dose opioids with benzodiazepines and/or sedatives without clear counseling about the risks of taking both medications (Patients 1 and 10);
- f. The Respondent prescribed opioids through telephonic refills without seeing patients in person for physical assessments (Patients 5 and 10);
- g. The Respondent prescribed a patient high-dose opioids in excess of 1,500 morphine milligram equivalents (MME) per day without also prescribing Narcan (Patient 1); and
- h. The Respondent routinely prescribed high-dose opioids to a patient with a history of opioid use disorder (Patient 7).

*Additional Medical Records*

11. The Board provided the peer reviewers' reports to the Respondent and gave him an opportunity to review and respond to the reports. On or about April 16, 2021, the Respondent provided his response. Along with his response, the Respondent submitted approximately 840 pages of additional medical records for Patients 1-10. The additional medical records included about 830 pages of laboratory reports from toxicology screens.<sup>3</sup>

12. Nearly all of the additional medical records were dated before the Board's November 9, 2020 subpoena duces tecum to the Respondent for "a complete copy of any and all medical records" of Patients 1-10, and before the Respondent's signed Certification of Medical Records for each patient, in which he attested to sending the Board "all laboratory reports," among other things.

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<sup>3</sup> One of the peer reviewers noted in their report that the Respondent failed to include copies of the urine toxicology screens in some of the patients' medical record provided to the Board. The Respondent's submission of the toxicology screens was in response to that peer reviewer's concerns.

## CONCLUSIONS OF LAW

Based on the foregoing findings of fact, Disciplinary Panel A concludes as a matter of law that the Respondent failed 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 other location in this State, in violation of Health Occ. § 14-404(a)(22); and failed to cooperate with a lawful investigation conducted by the Board or a disciplinary panel, in violation of Health Occ. § 14-404(a)(33).

## ORDER

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

**ORDERED** that the Respondent is **REPRIMANDED**; and it is further

**ORDERED** that the Respondent is **permanently prohibited** from treating chronic pain patients, and from prescribing and dispensing all opioids, benzodiazepines, and sedative-hypnotics; and it is further

**ORDERED** that the Respondent is **permanently prohibited** from certifying patients for the medical use of cannabis; and it is further

**ORDERED** that on every January 31st thereafter if the Respondent holds a Maryland medical license, the Respondent shall provide the Board with an affidavit verifying that the Respondent has not treated chronic pain patients, or prescribed or dispensed any opioids, benzodiazepines, or sedative-hypnotics, or certified patients for the medical use of cannabis in the past year; and it is further

**ORDERED** that if the Respondent fails to provide the required annual verification of compliance with these conditions:

(1) There is a presumption that the Respondent has violated these permanent conditions; and

(2) The alleged violation will be adjudicated pursuant to the procedures of a Show Cause Hearing; and it is further

**ORDERED** that the Respondent agrees that the Controlled Dangerous Substances (“CDS”) Registration issued by the Office of Controlled Substances Administration will be restricted to the same categories of CDS as limited by this Order; and it is further

**ORDERED** that the disciplinary panel may issue administrative subpoenas to the Maryland Prescription Drug Monitoring Program on a quarterly basis for the Respondent’s Controlled Dangerous Substances (“CDS”) prescriptions. The administrative subpoenas will request the Respondent’s CDS prescriptions from the beginning of each quarter; and it is further

**ORDERED** that within **ONE YEAR** from the effective date of this Consent Order, the Respondent shall pay a civil fine of **FIVE (5) THOUSAND DOLLARS (\$5,000)**. 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, 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 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.l(b)(2) and Gen. Prov. § 4-333(b)(6).

01/10/2022  
Date

***Signature on File***

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



## CONSENT

I, Lorrin D. Martin, 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*

12/29/2021  
Date

Lorrin D. Martin, M.D.  
Respondent

### NOTARY

STATE OF Maryland

CITY/COUNTY OF Harford

I HEREBY CERTIFY that on this 29<sup>th</sup> day of December 2021, before me, a Notary Public of the foregoing State and City/County, personally appeared Lorrin D. Martin, 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.

Deborah A. Estor  
Notary Public

My Commission expires:

9/23/25

