

IN THE MATTER OF  
BRYAN S. WILLIAMS, M.D.  
Applicant for Reinstatement  
Former License No: D66774

\* BEFORE THE  
\* MARYLAND STATE  
\* BOARD OF PHYSICIANS  
\* Case No: 8822-0001

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**ORDER ON APPLICATION FOR REINSTATEMENT  
OF MEDICAL LICENSURE AFTER REVOCATION**

**I. PROCEDURAL AND FACTUAL HISTORY**

From 2010 until 2014, Bryan S. Williams, M.D., worked as an interventional pain management specialist. The Maryland State Board of Physicians (the “Board”) received a complaint that he inappropriately touched female patients. Based on evidence revealed during the Board’s investigation and presented at Dr. Williams’s six-day evidentiary hearing, the Board found that Dr. Williams violated several provisions of the Medical Practice Act by touching four patients in or around their sexualized body parts and misrepresenting his termination from his employment on subsequent employment and Board renewal applications.

On December 29, 2017, Disciplinary Panel A (the “Panel” or “Panel A”) of the Board issued a Final Decision and Order concluding that Dr. Williams violated the following provisions of the Medical Practice Act, Md. Health Occ. Code Ann. § 14-404(a)(3)(i) and (ii) – immoral and unprofessional conduct in the practice of medicine, due to his violation of the Board sexual misconduct regulations COMAR 10.32.17 for four patients; § 14-404(a)(11) – willfully making or filing a false report or record in the practice of medicine; and § 14-404(a)(36) – willfully making a false representation when seeking or making application for licensure or any other application related to the practice of medicine. Based on these violations, the Board revoked Dr. Williams’s medical license.

On May 14, 2021, Dr. Williams applied for the reinstatement of his medical license. On December 1, 2021, Panel A convened as a Reinstatement Inquiry Panel to consider Dr. Williams's petition for reinstatement of his medical license after revocation. The Panel reviewed Dr. Williams's application for reinstatement with attachments, Dr. Williams's responses to questions from the Board, reports from specialists; a response from the administrative prosecutor recommending denial of Dr. Williams's reinstatement, and Dr. Williams's prior Board Orders. The Panel also heard oral presentations from Dr. Williams, his counsel, and from the administrative prosecutor.

## **II. APPLICATION FOR REINSTATEMENT**

On May 4, 2021, the Board received Dr. Williams's application for reinstatement. The Board sent Dr. Williams a series of questions and requests including the following:

1. What is your understanding of the nature and circumstances of your conduct, which resulted in the revocation of your Maryland license?
2. What is your understanding of the Board's concerns with respect to your conduct?
3. Have you accepted responsibility for the action(s) resulting in the revocation of your license?
4. What steps have you taken to lessen the likelihood of recurrence? What steps would you take to lessen the likelihood of recurrence should your license be reinstated?
5. What are your plans for returning to the practice of medicine as a physician in the State of Maryland and what is your proposed practice setting? Do you have any employment prospects lined up in the event your license is reinstated?
6. What efforts have you made to maintain your competency to practice medicine in your area of specialty (i.e. continuing education credits)?

Additionally, the Board asked:

For character and fitness question (n), please provide further explanation regarding your termination from [Employer] for not having a chaperone when an exam was conducted, including why you were required to have a chaperone during exams and when the incident(s) that led to your termination occurred.

In his written response to the question asking about his understanding of his conduct that led to his license revocation, Dr. Williams simply listed the grounds for which he was disciplined

in the Board's Final Decision and Order, but did not describe any facts of his actual conduct that resulted in the revocation of his license. Specifically, Dr. Williams did not describe the sexual abuse he inflicted on his patients or acknowledge the instances of misrepresentations on his applications. In responding to the question regarding his understanding of the Board's concerns with his conduct, Dr. Williams generically referred to the Board's concern with "my ability to conduct myself in a professional manner which reflects the high ethical, moral, and medical standard required of all healthcare providers in the State of Maryland." In response to his question about whether he accepted responsibility, Dr. Williams simply stated "Yes." Dr. Williams did not express remorse or elaborate.

In response to the question asking what steps Dr. Williams took to prevent recurrence, Dr. Williams stated that he has "taken appropriate actions to address each of the Board's concerns. . . . [and that] a chaperone will be present at all times during examinations to ensure that all interactions are properly monitored." Aside from his assurance that he would use a chaperone in his practice going forward, the most specific information that Dr. Williams provided in his letter was his statement that he "completed CME credits in the areas of unprofessional behavior, professional boundaries, ethics, physician impairment, malpractice liability, health care quality, confirmation bias and bias in medical care."

### **III. CONSIDERATION OF APPLICATION**

The reinstatement of a physician's medical license after revocation is a discretionary decision by the Panel. Health Occ. § 14-409; see *Oltman v. Maryland State Board of Physicians*, 182 Md. App. 65, 78 (2008). The Panel must consider whether post-disciplinary reinstatement is in the interest of the health and welfare of the general public and consistent with the best interest of the profession. COMAR 10.32.02.06B(7). Critical issues for the Panel's consideration

include Dr. Williams's understanding of the nature of his violations, and his acceptance of responsibility for these violations. If a disciplinary panel chooses not to reinstate the petitioner's license, the "disciplinary panel decision denying reinstatement may set out when, *if ever*, a subsequent petition may be submitted." COMAR 10.32.02.06B(8) (emphasis added).

As an initial matter, the Panel notes the serious nature of Dr. Williams's conduct and the harm he caused to his patients. When revoking Dr. Williams' license, the Panel explained that he committed sexual violations against four patients and in doing so abused his professional status and breached the trust his patients placed in him. Dr. Williams placed his fingers in a patient's anus, and in another patient's vagina, and brushed his finger across another patient's clitoris. His conduct caused his patients significant distress. The State's policy focus is protecting the health, safety, and welfare of the public, as memorialized in Health Occ. § 1-102(a), and thus the Panel must take into account that he exhibited a pattern of sexual abuse, directly harming his patients.

Moreover, Panel A finds that Dr. Williams has not genuinely accepted responsibility for his actions. His response to the Board's follow-up questions did not acknowledge any wrongdoing or specify any concerns other than a generic discussion about professionalism. In responding to the specific question about his termination from employment, Dr. Williams continues to deny that he did anything wrong, claiming that he was not advised that he needed a chaperone present during his evaluations.

Though he states that he accepts responsibility for his actions, Dr. Williams's failure to acknowledge any misconduct does not instill confidence that he has sincerely taken responsibility for his actions.

Before this Panel, Dr. Williams stated that he would use a chaperone to protect himself from further accusations, but he did not express any sympathy towards the patients whom he harmed. The Board's Order revoking his license noted significant aftereffects of patients who were sexually abused by Dr. Williams. For instance, Patient 2 suffered from night terrors and sought psychiatric treatment to deal with her trauma based on Dr. William's conduct. And Patient 5 sought sexual assault counseling on a weekly basis. Dr. Williams's responses are not sufficient to assure the Panel that his conduct would not be repeated.

In the ALJ's proposed decision, on the adjudication of the charges, the ALJ recommended a permanent revocation of Dr. Williams's license. The Panel, instead, simply revoked his license, without any restriction on reapplying to practice medicine. Having considered all of the foregoing information, the Panel concludes that Dr. Williams has not satisfied the Panel that he is fit to return to the practice of medicine, reinstatement is not in the interest of the health and welfare of the general public, and reinstatement would not be consistent with the best interest of the profession. The Panel has no confidence that Dr. Williams will ever be safe to practice in this State again. The Panel will, therefore, deny his application for reinstatement and will not permit him to reapply.

**ORDER**

Disciplinary Panel A hereby **ORDERS** that the Petition for Reinstatement of Medical Licensure after Revocation of Bryan S. Williams, M.D., former license number D66774, is **DENIED**; and it is further

**ORDERED** that Dr. Williams shall not reapply for the reinstatement of his license to practice medicine in Maryland; and it is further

**ORDERED** that this Order is a public document.

12/27/2021  
Date

***Signature on File***

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