

<b>IN THE MATTER OF</b>	*	<b>BEFORE THE</b>
<b>CHARLES TITA, M.D.</b>	*	<b>MARYLAND STATE</b>
<b>Respondent</b>	*	<b>BOARD OF PHYSICIANS</b>
<b>License Number: D78496</b>	*	<b>Case Number: 2218-0040B</b>
* * * * *		

**CONSENT ORDER**

On June 28, 2019, Disciplinary Panel B (“Panel B”) of the Maryland State Board of Physicians (the “Board”) charged Charles Tita, M.D. (the “Respondent”), License Number D78496, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 14-101 *et seq.* (2014 Repl. Vol. & 2018 Supp.).

Panel B charged the Respondent under the following provisions of Health Occ. § 14-404:

(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 a licensee:

- ...
  - (3) Is guilty of:
    - ...
      - (ii) Unprofessional conduct in the practice of medicine[.]

On September 25, 2019, Panel B was convened as a Disciplinary Committee for Case Resolution (“DCCR”) in this matter. Based on negotiations occurring as a result of the DCCR, the Respondent agreed to enter into this Consent Order, consisting of Findings of Fact, Conclusions of Law and Order.

## **FINDINGS OF FACT**

Panel B finds:

### **I. BACKGROUND**

1. At all times relevant, the Respondent was and is licensed to practice medicine in the State of Maryland. The Respondent was originally licensed to practice medicine in Maryland on September 29, 2014, under license number D78496. The Respondent's license is current through September 30, 2021.
2. The Respondent also has active licenses to practice medicine in the District of Columbia, and Pennsylvania. The Respondent was previously licensed to practice medicine in Michigan, Connecticut, and Rhode Island.
3. The Respondent is currently employed as a Medical Director at a facility in the District of Columbia, as well as a facility in Pennsylvania<sup>1</sup>.
4. From approximately July 2016 through March 2018, the Respondent worked as the Medical Director at a health care facility (the "Facility") in Baltimore, Maryland.

### **II. INVESTIGATION**

5. On or about September 26, 2017, Board staff received a complaint regarding the Respondent from a former Office Manager at the Facility ("Individual A"). The complaint alleged that the Respondent treated numerous patients with "poor bedside manor [sic], aggression, disrespect, issuance of wrong medication, and nodding off while

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<sup>1</sup> To ensure confidentiality and privacy, the names of individuals and facilities involved in this case, other than the Respondent, are not disclosed in this document. The Respondent may obtain the identity of all individuals and facilities referenced in this document by contacting the administrative prosecutor.

in session.” The complaint stated further that Individual A had a video of the Respondent “nodding off.”

6. On or about October 10, 2017, board staff conducted a recorded interview under oath with Individual A. During the interview Individual A stated that she was employed at the Facility as a billing specialist and interim office manager from approximately February through August 2017. One of her responsibilities was to bring certain complaints to the Respondent’s attention regarding his treatment of numerous patients.

7. Individual A detailed an incident in which she had been “assaulted” by the Respondent. She stated that she went to speak with the Respondent about a particular patient and the Respondent began yelling at her for no apparent reason. She stated that the Respondent “decides to push me with the door, push me up on my left side with the door to shove me out of the door.” She continued stating that after she walked away the Respondent followed her to another office while continuing to yell at her until she closed the door behind her at which point “he called me a female dog and walked away.” She further stated that this incident was “not the first time [the Respondent] has displayed aggression towards me. And it was making my work environment kind of hostile.” Individual A stated that she filed a written complaint about these issues to human resources but no response was received. She ultimately filed a complaint with the Equal Employment Opportunity Commission (“EEOC”). She indicates that subsequent to the filing of that complaint, her employment with the Facility was terminated.

8. On or about October 17, 2017, Board staff conducted a recorded interview under oath with another former employee the Facility (“Individual B”). Individual B is a

medical assistant by training and worked at Facility 1 as a customer care associate from approximately May 2017 through August 2017. She stated that while she was employed there, she would regularly receive complaints from patients about the Respondent's disrespectful demeanor. She stated that one patient complained that the Respondent nodded off during their session.

9. Individual B stated that in addition to being an employee, she began to take her son to see the Respondent in approximately June of 2017. During her son's first session with the Respondent, Individual B stated that she observed the Respondent "nodding off" in the middle of the session. She stated that whenever the Respondent was nodding off, her son would repeatedly call for his attention, after which he would wake up temporarily. Individual B also made a video recording of the Respondent nodding off during the session.

10. Individual B described her son's second session with the Respondent, which took place in September of 2017, wherein the Respondent exhibited flirtatious behavior toward Individual B while he was supposed to be treating her son. "He actually showed me a photo of myself that he saved in his phone from [the internet], and also he looked into my son's chart and he kept trying to pull up my address....When are we going to go out to dinner? When can I take you out?" Individual B states that after this encounter with the Respondent she became uncomfortable at the possibility of the Respondent showing up at her house and decided not to continue her son's treatment at the Facility.

11. On or about April 27, 2018, Board staff interviewed the Director of Human Resources and Administration at the Facility ("Individual C"). Individual C stated that

one of her duties was the handling of any patient complaints and any disciplinary actions flowing therefrom. Board staff asked Individual C about any complaints she received regarding the Respondent and she stated that one patient reported that she got the “wrong medication and she just felt like [the Respondent] wasn’t listening.” Individual C stated that she was subsequently made aware by another patient that the Respondent was observed “nodding off” during patient sessions.

12. On or about July 31, 2018, Board staff interviewed a family member (“Individual D”) who accompanied a patient to see the Respondent. Individual D stated that on or about February 28, 2017, she accompanied the patient to a session with the Respondent who was behaving “a little strange.” Individual D stated that, “I was sitting there and he was talking to us and all of a sudden he stopped.” Individual D goes on to state that the Respondent’s eyes were almost all the way closed so she asked him if he was tired, to which he responded by mumbling unintelligibly.

13. Individual D informed Board staff that she wrote a letter documenting her concerns from this session to the Facility, and provided a copy to Board staff. Individual D closed her letter by stating “[The Respondent] does not represent the profession of mental health with dignity and respect. There should be correction done to correct the issue [sic].”

14. On or about August 23, 2018, the Board, pursuant to Health Occ. §14-402(a)<sup>2</sup>, sent a letter to the Respondent referring him to a Board-approved program (the “Program”)

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<sup>2</sup> Health Occ. § 14-402(a) states: In reviewing an application for licensure, certification, or registration or in investigation against a licensed physician or any allied health professional regulated by the Board under

for an evaluation which was scheduled for September 4, 2018. The Respondent failed to appear to the Program for evaluation.

15. On or about September 6, 2018, the Board sent a letter to the Respondent regarding his failure to appear for his appointment at the Program. This appointment was rescheduled for September 5, for which the Respondent also failed to appear. The Respondent contacted the Board and advised of a scheduling conflict that would prevent him from being able to keep the appointments. The Respondent ultimately appeared at the Program on October 4, 2018.

16. On or about October 8, 2018, the Board received the Respondent's neuropsychological evaluation report from the Program. The evaluation "does not reveal any diagnosable disorder in [the Respondent]. Rather, his standing on dimensional traits – of intellect and personality – may make him ill-suited to a career as a psychiatrist."

17. On or about December 12, 2018, the Respondent was interviewed under oath by Board staff. The Respondent stated that he worked at the Facility as a psychiatrist and Medical Director from July 5, 2016, through March 2018. He indicated that he usually worked on Tuesdays and Wednesdays for approximately ten hours per day, seeing approximately 3 patients per hour. The Respondent stated that he resigned from the Facility because he needed a break from working so hard, as well as "some differences in the way that the paperwork there was formatted." The Respondent resigned from the

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this title, the Physician Rehabilitation Program may request the Board to direct, or the Board on its own initiative may direct, any physician or any allied health professional regulated by the Board under this title to submit to an appropriate examination.

Facility on or about March 25, 2018. The Respondent does not currently practice psychiatry in the State of Maryland.

18. During the course of the interview Board staffed asked the Respondent about patients complaining that he was nodding off during sessions. The Respondent stated repeatedly that he did not recall nodding off, but concedes that his workload at the time of these incidents was excessive, and that he suffered from fatigue. The Respondent was asked about the incident involving Individual A being hit with the door, to which he responded that he did no such thing.

### **CONCLUSIONS OF LAW**

Based on the foregoing Findings of Fact, Panel B concludes as a matter of law that the Respondent is guilty of unprofessional conduct in the practice of medicine, in violation of Health Occ. § 14-404(a)(3)(ii).

### **ORDER**

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

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

**ORDERED** that the Respondent is placed on **PROBATION** for a minimum of **THREE (3) YEARS**.<sup>3</sup> During probation, the Respondent shall comply with the following terms and conditions of probation:

- (1) Within **SIX (6) MONTHS**, the Respondent is required to take and successfully complete two courses: one course in boundaries and one course in Patient-Provider relations. The following terms apply:

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<sup>3</sup> If the Respondent's license expires during the period of probation, the probation and any conditions will be tolled.

- (a) it is the Respondent's responsibility to locate, enroll in and obtain the disciplinary panel's approval of the course before the course is begun;
  - (b) the disciplinary panel will not accept a course taken over the internet;
  - (c) the Respondent must provide documentation to the disciplinary panel that the Respondent has successfully completed the course;
  - (d) the course may not be used to fulfill the continuing medical education credits required for license renewal;
  - (e) the Respondent is responsible for the cost of the course.
- (2) The Respondent shall enroll in the Maryland Professional Rehabilitation Program (MPRP) as follows:
- (a) Within 5 business days, the Respondent shall contact MPRP to schedule an initial consultation for enrollment;
  - (b) Within 15 business days, the Respondent shall enter into a Participant Rehabilitation Agreement and Participant Rehabilitation Plan with MPRP;
  - (c) the Respondent shall fully and timely cooperate and comply with all MPRP's referrals, rules, and requirements, including, but not limited to, the terms and conditions of the Participant Rehabilitation Agreement(s) and Participant Rehabilitation Plan(s) entered with MPRP, and shall fully participate and comply with all therapy, treatment, evaluations, and screenings as directed by MPRP;
  - (d) the Respondent shall sign and update the written release/consent forms requested by the Board and MPRP, including release/consent forms to authorize MPRP to make verbal and written disclosures to the Board and to authorize the Board to disclose relevant information from MPRP records and files in a public order. The Respondent shall not withdraw his release/consent;
  - (e) the Respondent shall also sign any written release/consent forms to authorize MPRP to exchange with (i.e., disclose to and receive from) outside entities (including all of the Respondent's current therapists and treatment providers) verbal and written information concerning the Respondent and to ensure that MPRP is authorized to receive the medical records of the Respondent, including, but not limited to, mental health and



drug or alcohol evaluation and treatment records. The Respondent shall not withdraw his release/consent;

(f) the Respondent's failure to comply with any of the above terms or conditions including terms or conditions of the Participant Rehabilitation Agreement(s) or Participant Rehabilitation Plan(s) constitutes a violation of this Consent Order; and it is further

**ORDERED** that the Respondent shall not apply for early termination of probation; and it is further

**ORDERED** that, after the Respondent has complied with all terms and conditions of probation and the minimum period of probation imposed by the Consent Order has passed, the Respondent may submit to the Board a written petition for termination of probation. After consideration of the petition, the probation may be terminated through an order of the disciplinary panel. The Respondent may be required to appear before the disciplinary panel to discuss his or her petition for termination. The disciplinary panel may grant the petition to terminate the probation, through an order of the disciplinary panel, if the Respondent has complied with all probationary terms and conditions and there are no pending complaints relating to the charges; and it is further

**ORDERED** that a violation of probation constitutes a violation of the Consent Order;

**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** this Consent Order is a public document. *See* Md. Code Ann., Health Occ. §§ 1-607, 14-411.1(b)(2) and Gen. Prov. § 4-333(b)(6).

10/15/2019  
Date

***Signature on File***

Christine A. Farrelly  
Executive Director  
Maryland State Board of Physicians

## CONSENT

I, Charles Tita, 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

10/08/2019  
Date

Charles Tita, M.D.  
Respondent

### NOTARY

STATE OF Maryland  
CITY/COUNTY OF Montgomery

I HEREBY CERTIFY that on this 8<sup>th</sup> day of October 2019, before me, a Notary Public of the foregoing State and City/County, personally appeared Charles Tita, 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.



Notary Public

My Commission expires: 03/22/2021

