

IN THE MATTER OF  
PETER J. DELENICK, M.D.  
Respondent

\* BEFORE THE  
\* MARYLAND STATE  
\* BOARD OF PHYSICIANS  
\* Case Number: 2220-0206B

License Number: D80662

\* \* \* \* \*

CONSENT ORDER

On January 8, 2021, Disciplinary Panel B (“Panel B”) of the Maryland State Board of Physicians (the “Board”) charged Peter J. Delenick, M.D. (the “Respondent”), License Number D80662, 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 B 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:

...

(3) Is guilty of: . . .

(ii) Unprofessional conduct in the practice of medicine;

...

(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]

...

(40) Fails to keep adequate medical records as determined by appropriate peer review[.]

On March 24, 2021, 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 this Consent Order, consisting of the following Findings of Fact, Conclusions of Law, and Order.

### **FINDINGS OF FACT**

Panel B finds:

#### **I. BACKGROUND & LICENSING INFORMATION**

1. At all relevant times, the Respondent was and is licensed to practice medicine in the State of Maryland. The Board initially licensed the Respondent to practice medicine in Maryland on or about November 13, 2015, under License Number D80662. His license is currently scheduled to expire on or about September 30, 2022, subject to renewal.

2. The Respondent is board-certified in orthopedic surgery. Until recently, he had practiced at a pain management clinic in Middle River, Maryland (the “Clinic”).

3. On or about August 30, 2017, Panel B entered into a Consent Order with the Respondent. Panel B found that the Respondent behaved disruptively on several occasions and concluded that the Respondent engaged in unprofessional conduct in the practice of medicine. Panel B placed the Respondent on probation for a minimum of three years and required that he enroll in and comply with the requirements of a Board-approved program. The Respondent remains on probation as of the date of these charges.

#### **II. COMPLAINT**

4. On or about December 11, 2019, the Board received a complaint from the Maryland Office of Controlled Substances Administration (“OCSA”), which alleged that, based on information OCSA had gathered, the Respondent was prescribing controlled

dangerous substances (“CDS”) to the Practice owner (“Patient 1”).<sup>1</sup> OCSA also explained that Patient 1, an unlicensed individual, had a 2016 conviction in Harford County, Maryland, for conspiracy to distribute CDS prior to establishing the Clinic.

### III. BOARD INVESTIGATION

5. The Board initiated an investigation of the Respondent based on OCSA’s complaint.

6. On or about January 10, 2020, the Board issued a subpoena to the Respondent for medical records of Patient 1. The Respondent provided the Board with the subpoenaed records for Patient 1 on or about January 16, 2020.

7. Patient 1’s medical records showed that, among other things, the Respondent evaluated and prescribed CDS to Patient 1 beginning on or about March 21, 2019 and continuing monthly until on or about January 9, 2020.<sup>2</sup>

8. The Board identified ten additional patients (“Patients 2-11”) who received CDS prescriptions from the Respondent between January 21, 2019 and January 22, 2020. On or about February 11, 2020, the Board issued a subpoena to the Respondent for the medical records of Patients 2-11. Between February 25 and March 2, 2020, the Respondent provided the Board with the subpoenaed medical records.

9. Following an incident that the Respondent reported to the Board on or about March 9, 2020, involving a patient that possibly stole a prescription from the Respondent’s office, the Board issued a subpoena to the Respondent for medical records of the involved

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

<sup>2</sup> The Respondent later clarified during his interview with Board staff that he discharged Patient 1 from his care on or about February 25, 2020 (see ¶ 10(j), below).

patient ("Patient 12"). The Respondent provided the Board with the subpoenaed medical records for Patient 12 on or about March 24, 2020.

10. On or about March 31, 2020, Board staff interviewed the Respondent under oath. During his interview, the Respondent explained the following:

- a. The Respondent's pain management training consisted of taking online courses, obtaining twelve hours of continuing medical education on risk management, attending an all-day seminar by the Drug Enforcement Agency, and reviewing articles about opioid safety and efficacy.
- b. Patient 1, the Clinic's owner, hired the Respondent after the Respondent responded to a job posting for the Clinic on Craigslist.
- c. As part of his probation, the Respondent had Patient 1 submit reports to the Board-approved program as the Respondent's "vocational monitor."
- d. In March 2019, Patient 1 approached the Respondent and told him that Patient 1 had been discharged from his prior pain management physician and "pleaded with [the Respondent] to help him out until he found another pain management physician." The Respondent agreed because he believed that Patient 1 "needed help," and "would go into withdrawal if he was unable to get his medication[.]"
- e. The Respondent had concerns about being Patient 1's provider while Patient 1 was also the Respondent's vocational monitor. The Respondent "did not want to have any sense of impropriety in that relationship – in that doctor/patient relationship."
- f. While under the Respondent's care, Patient 1 performed his own urine drug screens; the Respondent "checked the cup" to verify the results.
- g. Urine drug screens consisted of Patient 1 escorting other patients to the bathroom where the patients would produce the specimen (unobserved), Patient 1 would read the results from a drug detection test, and then document those results on a form by circling the names of any drugs that had positive results.
- h. In February 2020, following service of the Board's subpoena for records, the Respondent notified several patients that the Board had subpoenaed their medical records.

- i. On February 25, 2020, Patient 12 entered the Clinic and began screaming at the Respondent when he would not refill her prescription because he believed she was “high on drugs.” Patient 1 consoled Patient 12 and made comments that the Respondent believed were inappropriate. Patient 1 then tried to pressure the Respondent into refilling Patient 1’s opioid prescription.
- j. On February 25, 2020, the Respondent told Patient 1 that he would no longer act as Patient 1’s pain management physician. On March 11, 2020, the Respondent resigned from the Clinic.

#### IV. PEER REVIEW

11. On or about May 15, 2020, the Board referred the twelve patient records obtained from the Respondent and related materials to a peer review entity for review.

12. Two peer reviewers, one board-certified in anesthesiology and pain medicine and one board-certified in physical medicine/rehabilitation and pain medicine, separately reviewed the twelve patient records. On or about August 10, 2020, the peer reviewers submitted their reports to the Board.

13. The peer reviewers concurred that the Respondent did not meet the standard of quality medical care for all twelve patients for reasons including, but not limited to:

- a. The Respondent maintained patients on high-dose opioids totaling at least 90 MME<sup>3</sup> per day (up to 270 MME per day) with no attempts to taper the patients or reduce the doses<sup>4</sup> (Patients 1, 2, 4, 5, 7, 8, 9, 10, 11, and 12);
- b. The Respondent utilized inadequate and unverifiable in-office urine drug screens consisting of hand-written results, failed to send specimens for

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<sup>3</sup> Morphine Milligram Equivalence (“MME”) is a value assigned to each opioid to represent its relative potency by using morphine as the standard comparison. The *CDC Guideline for Prescribing Opioids for Chronic Pain* uses MME to establish recommended opioid dosing and currently recommends using precaution when prescribing opioid doses greater than or equal to 50 MME per day and avoiding or carefully justifying a decision to increase opioid doses greater than or equal to 90 MME per day.

<sup>4</sup> The records do not show that the Respondent increased patients’ opioid doses.

confirmatory testing, and had no laboratory results for these urine drug screens (Patients 1, 2, 3, 4, 6, 7, 8, 9, 10, 11, and 12);

- c. The Respondent prescribed benzodiazepines to patients who were also prescribed high-dose opiates without documenting a clear basis for doing so despite the associated risks (Patients 3, 7, 8, and 9);
- d. The Respondent did not periodically review patient prescriptions through the Prescription Drug Monitoring Program (Patient 1);
- e. The Respondent prescribed high-dose opioids despite a urine drug screen showing negative results for a prescribed opioid (Patient 1); and
- f. The Respondent failed to obtain any random urine drug screens to ensure medication compliance (Patient 5).

14. The peer reviewers also concurred that the Respondent failed to maintain adequate medical records for Patient 5 because the records did not include random urine drug screens or pill counts despite the Respondent's claim of doing so for all patients.

15. The Board provided the Respondent with an opportunity to respond to the peer reviewers' reports. On or about September 2, 2020, the Respondent submitted his response disagreeing with the peer reviewers' conclusions. The Respondent faulted the peer reviewers for citing the CDC Guideline because, according to the Respondent, it applies only to "opioid naïve patients." He also claimed that he had performed certain actions, such as checking PDMP, that were not documented in the patients' records.

### **CONCLUSIONS OF LAW**

Based on the foregoing Findings of Fact, Panel B concludes as a matter of law that the Respondent violated Health Occ. § 14-404(a)(3)(ii) by engaging in unprofessional conduct in the practice of medicine; the Respondent violated Health Occ. § 14-404(a)(22) by failing to meet appropriate standards as determined by appropriate peer review for the delivery of quality medical care performed in any location in this State; and the Respondent

violated Health Occ. § 14-404(a)(40) by failing to keep adequate medical records as determined by appropriate peer review.

**ORDER**

It is thus, on the affirmative vote of a majority of the quorum of Disciplinary Panel B of the Board, hereby:

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

**ORDERED** that the Respondent's probation imposed by Panel B's Consent Order dated August 30, 2017, is **TERMINATED**; 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 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 this condition:

- (1) There is a presumption that the Respondent has violated this permanent condition; and
- (2) The alleged violation will be adjudicated pursuant to the procedures of a Show Cause Hearing; and it is further

**ORDERED** that upon the effective date of this Consent Order, the Respondent is placed on **PROBATION** for a **minimum of THREE (3) YEARS**.<sup>5</sup> During probation, the Respondent shall comply with the following terms and conditions of probation:

- (1) The Respondent is prohibited from prescribing and dispensing all opioids and benzodiazepines for the first **SIX (6) MONTHS** of probation and until the Respondent has taken and successfully completed a course in opioid prescribing as set forth in probationary Condition 5 below.
- (2) 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.
- (3) 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.
- (4) The Respondent shall remain enrolled in and comply with all current Agreements and Plans with the Maryland Professional Rehabilitation Program (“MPRP”) as follows:
  - (a) 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;

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<sup>5</sup> If the Respondent’s license expires during the period of probation, the probation and any conditions will be tolled.



- (b) 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;
  - (c) 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;
  - (d) 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.
- (5) Within **SIX (6) MONTHS** of the effective date of this Consent Order, the Respondent is required to take and successfully complete: (a) a course in **opioid prescribing**; and (b) a course in **ethics/boundaries**. The following terms apply:
- (i) It is the Respondent's responsibility to locate, enroll in and obtain the disciplinary panel's approval of the courses before the courses are begun;
  - (ii) The disciplinary panel will accept a course taken in-person or over the internet during the state of emergency;
  - (iii) The Respondent must provide documentation to the disciplinary panel that the Respondent has successfully completed the courses;
  - (iv) The courses may not be used to fulfill the continuing medical education credits required for license renewal;
  - (v) The Respondent is responsible for the cost of the courses;
- (6) After the first six months of probation and successful completion of the course in opioid prescribing, the Respondent shall be subject to supervision for a **minimum**

of **TWO (2) YEARS<sup>6</sup>** by a disciplinary panel-approved supervisor who is board-certified in pain medicine as follows:

- (a) Within **30 CALENDAR DAYS** of the effective date of this Consent Order, the Respondent shall provide the disciplinary panel with the name, pertinent professional background information of the supervisor whom the Respondent is offering for approval, and written notice to the disciplinary panel from the supervisor confirming his or her acceptance of the supervisory role of the Respondent and that there is no personal or professional relationship with the supervisor;
- (b) The Respondent's proposed supervisor, to the best of the Respondent's knowledge, should not be an individual who is currently under investigation, and has not been disciplined by the Board within the past five years;
- (c) If the Respondent fails to provide a proposed supervisor's name within 30 calendar days from the effective date of the order, the Respondent's license shall be automatically suspended from the 31st day until the Respondent provides the name and background of a supervisor;
- (d) The disciplinary panel, in its discretion, may accept the proposed supervisor or request that the Respondent submit a name and professional background, and written notice of confirmation from a different supervisor;
- (e) The supervision begins after the disciplinary panel approves the proposed supervisor;
- (f) The disciplinary panel will provide the supervisor with a copy of this Consent Order and any other documents the disciplinary panel deems relevant;
- (g) The Respondent shall grant the supervisor access to patient records selected by the supervisor, which shall, to the extent practicable, focus on the type of treatment at issue in the Respondent's charges;
- (h) If the supervisor for any reason ceases to provide supervision, the Respondent shall immediately notify the Board and shall not practice medicine beyond the 30th day after the supervisor has ceased to provide supervision and until the Respondent has submitted the name and

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<sup>6</sup> If the Respondent is not practicing medicine in Maryland, the supervision shall begin when the Respondent resumes the practice of medicine and the disciplinary panel has approved the proposed supervisor. The Respondent shall submit the name of a proposed supervisor within 30 days of resuming the practice of medicine and shall be subject to supervision by a disciplinary panel approved supervisor upon the return to the practice of medicine.

professional background, and written notice of confirmation, from a proposed replacement supervisor to the disciplinary panel;

- (i) It shall be the Respondent's responsibility to ensure that the supervisor:
  - (1) Reviews the records of five (5) patients each month, such patient records to be chosen by the supervisor and not the Respondent;
  - (2) Meets in-person with the Respondent at least once each month and discuss in-person with the Respondent the care the Respondent has provided for these specific patients;
  - (3) Be available to the Respondent for consultations on any patient;
  - (4) Maintains the confidentiality of all medical records and patient information;
  - (5) Provides the Board with quarterly reports which detail the quality of the Respondent's practice, any deficiencies, concerns, or needed improvements, as well as any measures that have been taken to improve patient care; and
  - (6) Immediately reports to the Board any indication that the Respondent may pose a substantial risk to patients;
- (j) The Respondent shall follow any recommendations of the supervisor;
- (k) If the disciplinary panel, upon consideration of the supervisory reports and the Respondent's response, if any, has a reasonable basis to believe that the Respondent is not meeting the standard of quality care or failing to keep adequate medical records in his or her practice, the disciplinary panel may find a violation of probation after a hearing;

(7) Within **ONE (1) YEAR** from the effective date of this Consent Order, the Respondent shall pay a civil fine of **FIVE 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 the Respondent shall not apply for early termination of probation;

and it is further

**ORDERED** that a violation of probation constitutes a violation of the Consent Order; 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, 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, 14-411.1(b)(2) and Gen. Prov. § 4-333(b)(6) (2014 & 2019 Supp.).

## *Signature on File*

04/19/2021  
Date

Christine A. Farrelly  
Executive Director  
Maryland Board of Physicians

### CONSENT

I, Peter J. Delenick, 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

4/15/2021  
Date

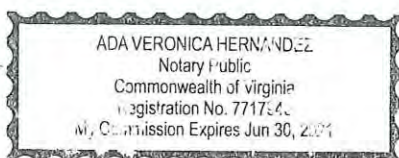
Peter J. Delenick, M.D.

### NOTARY

STATE OF Virginia  
CITY / COUNTY OF city of Alexandria

I HEREBY CERTIFY that on this 15<sup>th</sup> day of April 2021, before me, a Notary Public of the foregoing State and City/County, personally appeared Peter J. Delenick, 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.



[Signature]  
Notary Public  
My Commission expires: 06/30/2021