

IN THE MATTER OF
JULIA E. OLSON, M.D.
Respondent

* BEFORE THE
* MARYLAND STATE
* BOARD OF PHYSICIANS
* Case Number: 2223-0105 B

License Number: D90487

* * * * *

CONSENT ORDER

On June 20, 2023, Disciplinary Panel B (“Panel B”) of the Maryland State Board of Physicians (the “Board”) charged **Julia E. Olson, M.D.** (the “Respondent”), License Number D90487, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. §§ 14-101 *et seq.* (2021 Repl. Vol.). Panel B charged the Respondent under the following provisions of the Act:

Health Occ. § 14-404. License denial, suspension, or revocation.

(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;

.....

(8) Is addicted to, or habitually abuses, any narcotic or controlled dangerous substance as defined in § 5-101 of the Criminal Law Article;

- (9) Provides professional services
 - (ii) While using any narcotic or controlled dangerous substance, as defined in § 5-101 of the Criminal Law Article, or other drug that is in excess of therapeutic amounts or without medical indication;
-
- (17) Makes a willful misrepresentation in treatment; [and]
-
- (27) Sells, prescribes, gives away, or administers drugs for illegal or illegitimate medical purposes[.]

On September 27, 2023, Panel B 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 B makes the following findings of fact:

I. INTRODUCTION

1. On March 20, 2023, the Respondent collapsed in the operating room after using Propofol while providing medical services to a patient. The Respondent subsequently admitted to diverting medications to avoid detection. The Respondent diverted medication and used it while on duty.

BACKGROUND

2. The Respondent was originally licensed to practice medicine in Maryland on November 2, 2020, under License Number D90487. The Respondent has retained

continuous licensure in Maryland and her license is scheduled to expire on September 30, 2025.

3. On June 15, 2023, Panel B, through an Order for Summary Suspension of License to Practice Medicine, summarily suspended the Respondent's license to practice medicine after a Board investigation determined that she has a health condition that affects her ability to practice medicine safely.

4. The Respondent is Board Certified in Anesthesiology.

5. At all times relevant hereto, the Respondent practiced as an anesthesiologist at a health care facility (the "Facility")¹ in Maryland.

II. THE COMPLAINT

6. On or about March 28, 2023, the Board received a Mandated 10-Day Report² (the "Report") from the Facility stating that "on March 20, 2023, [the Respondent] was delivering general anesthesia to a patient in the [Facility's] operating room" when she "collapsed to the floor, and was found to be unconscious and cyanosed."³ The Respondent requested and was granted a leave of absence from the Facility.

¹ To maintain confidentiality, the names of healthcare facilities and individuals will not be identified in this document. The Respondent may obtain the names of the health care facilities, individuals, and medications referenced herein by contacting the administrative prosecutor.

² See Health Occ. § 14-413.

³ "Cyanosis" - a bluish or purplish discoloration (as of skin) due to deficient oxygenation of the blood Merriam-Webster.com Medical Dictionary, Merriam-Webster.

III. BOARD INVESTIGATION

7. The Board initiated an investigation based on the Report from the Facility. By letter dated April 26, 2023, the Board notified the Respondent of its investigation and directed her to address the Report in a written response. As a part of the investigation, Board staff interviewed witnesses and obtained the Respondent's medical records and health records.⁴

Nurse A

8. On May 3, 2023, Board staff conducted an under-oath interview of a registered nurse ("Nurse A") who directly observed the Respondent in the operating room on March 20, 2023.

9. Nurse A stated that she walked into the operating room at approximately 11:00 a.m. to relieve another nurse for her lunch break. While Nurse A and the Respondent were talking, the Respondent lifted up a bottle of Versed⁵ and asked Nurse A to look at the vial to confirm that it was empty. The Respondent lifted the vial up and said to Nurse A, "I'm trying to draw this up, and nothing's coming out of it. See, the vial is empty. There is nothing coming into the syringe." Nurse A confirmed that the vial was empty and the Respondent asked Nurse A to waste⁶ the bottle with her so that the Respondent could pull

⁴ To maintain confidentiality, specific information in the medical records and health records, including but not limited to evaluations and diagnosis, will not be disclosed in this document. This information will be disclosed to the Respondent upon request.

⁵ Versed is a Schedule IV controlled substance. It is a benzodiazepine that is used to help you relax before having a minor surgery, dental work, or other medical procedure.

⁶ Nurse A explained that a "waste" occurs when there is medication leftover and it must be documented in the Cactus disposal system that is attached to the Pyxis. The medication is to be

out another vial to provide to the patient before they woke up. The Respondent properly completed the waste with Nurse A. Approximately 20 minutes later, Nurse A heard a loud crash and found the Respondent unconscious on the floor of the operating room.

10. The Respondent was not breathing but did have a pulse. The physicians and staff in the operating room at the time were able to revive the Respondent. Nurse A then noticed a syringe sticking out of the Respondent's left sock which was attached to tubing and an angiocath in the Respondent's foot.

11. Nurse A asked the Respondent what the angiocath was and whether it was used to inject the Versed that Nurse A had just "wasted" with the Respondent. The Respondent stated that it was not the Versed but rather Propofol.⁷ Nurse A looked at the syringe and confirmed that the substance was a cloudy white substance that has the appearance of this medication.

12. The Respondent was then transported to the emergency room department at the Facility for an evaluation.

13. Nurse A also stated that approximately one week prior to the event in the operating room on March 20, 2023, the Respondent was acting "very erratic, and strangely...very giddy initially and very hyper...which is very out of character" for the Respondent. Then the Respondent's mood "immediately shifted during the same surgery

deposited into the Cactus system and the clinician is to dispose of the syringe, vial, needle, etc. in front of the nurse who then confirms the waste electronically with a fingerprint in the Pyxis system.

⁷ Propofol is an intravenous anesthetic used for procedural sedation, during monitored anesthesia care, or as an induction agent for general anesthesia.

she was into, getting very weepy and teary and seeming very depressed all of a sudden.” The Respondent tripped twice during the surgery, after which the Facility relieved the Respondent from further duties that day.

Physician Supervisor

14. On May 17, 2023, Board staff conducted an under-oath interview of a physician (“Physician Supervisor”) who deals with issues regarding the medical staff at the Facility.

15. The Physician Supervisor met with the Respondent who admitted that she had been using controlled dangerous substances for three-to-four months and admitted to diverting the medication. The Respondent specifically admitted to using Dilaudid⁸, Fentanyl⁹, Versed, and Propofol. The Respondent stated that she would provide the patient with what was needed and save the remaining medication in a clean syringe and use it at a later time. The Respondent would then inject saline into the syringe to make it appear that the medication was being properly discarded pursuant to the proper waste procedures.

16. The Respondent submitted a request for a one-year leave of absence from the Facility.

17. The Physician Supervisor stated that “the week before [the March 20, 2023] event...[the Respondent] had to be relieved because she said that her last operation was

⁸ Dilaudid is a Schedule II opioid analgesic drug and is indicated for moderate-to-severe pain.

⁹ Fentanyl is a Schedule II synthetic opioid drug for use as an analgesic and anesthetic. It is approximately 100 times more potent than morphine and 50 times more potent than heroin as an analgesic.

super stressful and she just needed some time to collect herself.” On another occasion “on Friday before the [March 20, 2023] event, [the Respondent] was acting kind of giddy in the operating room...and she tripped and fell down.” The Respondent pointed to a cord on the floor as the excuse for her fall. Later that day, the Respondent was “tearful and at the end of her case she went home and she was complaining about...anxiety, being tearful, just needing...some rest over the weekend.”

18. The Physician Supervisor stated, “I think it’s very clear looking back that on both [occasions] there was probably impairment.”

Locker Search

19. Board staff also conducted an under-oath interview of a senior nursing director (“Senior Nurse”) who deals with issues regarding the medical staff at the Facility and the director of nursing at the Facility (“Nurse Director”).

20. The Senior Nurse and Nurse Director stated that as a result of the Respondent’s collapse in the operating room and subsequent admission to diverting medication, the Facility conducted a search of the Respondent's locker to determine if the Respondent had any additional narcotics or illegal substances in her possession. The Facility search revealed two vials of a rocuronium reversal along with a tube of lidocaine ointment.

21. The Senior Nurse and Facility staff conducted a search of the Respondent’s purse and found two packaged blunt tip needles.

22. The Nurse Director also stated that after the Respondent's March 20, 2023 collapse, another nurse reported that the Respondent had fallen or tripped in the operating room a week prior.

Respondent's Written Response

23. By letter dated May 11, 2023, the Respondent, through counsel, provided a written response to the Board.

24. In the response, the Respondent admitted that "when she collapsed during a procedure on March 20, 2023, she was found with a syringe and IV catheter attached to her foot." The Respondent "acknowledges and understands that there is no excuse for such behavior - especially while providing patient care."

CONCLUSIONS OF LAW

Panel B concludes that the Respondent: is guilty of unprofessional conduct in the practice of medicine, in violation of Health Occ. § 14-404(a)(3)(ii); was addicted to, or habitually abused, any narcotic or controlled dangerous substance as defined in § 5-101 of the Criminal Law Article, in violation of Health Occ. § 14-404(a)(8); provided professional services while using any narcotic or controlled dangerous substance, as defined in § 5-101 of the Criminal Law Article, or other drug that is in excess of therapeutic amounts or without medical justification, in violation of Health Occ. § 14-404(a)(9)(ii); made a willful misrepresentation in treatment, in violation of Health Occ. § 14-404(a)(17); and sold, prescribed, gave away, or administered drugs for illegal or illegitimate medical purposes, in violation of Health Occ. § 14-404(a)(27).

ORDER

It is, thus, by Board Disciplinary Panel B, hereby

ORDERED that the summary suspension of the Respondent's license to practice medicine in Maryland, initially ordered on June 15, 2023, is terminated as moot based upon the suspension ordered under this Consent Order; and it is further

ORDERED that Respondent Julia E. Olson, M.D. is **REPRIMANDED**; and it is further

ORDERED that the Respondent's license to practice medicine in the State of Maryland is **SUSPENDED** for a minimum period of **FIFTEEN (15) MONTHS**.¹⁰ During the suspension, the Respondent shall comply with the following terms and conditions of suspension:

1. During the suspension period, the Respondent shall not:

- (a) practice medicine;
- (b) take any actions to hold herself out to the public as a current provider of medical services;
- (c) authorize, allow or condone the use of the Respondent's name or provider number by any health care practice or any other licensee or health care provider;
- (d) function as a peer reviewer for the Board or for any hospital or other medical care facility in the State;
- (e) prescribe or dispense medicine;
- (f) perform any other act that requires an active medical license; and

2. The Respondent shall enroll in the Maryland Professional Rehabilitation Program

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;

¹⁰ If the Respondent's license expires while the Respondent is on suspension, the suspension period and any conditions of suspension will be tolled.

(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 to MPRP. 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 verbal and written information concerning the Respondent and to ensure that MPRP is authorized to receive the health care records of the Respondent. The Respondent shall not withdraw her release/consent;

(f) if, upon the authorization of MPRP, the Respondent transfers to a rehabilitation program in another state, the Respondent's failure to comply with any term or condition of that state's rehabilitation program, constitutes a violation of this Consent Order. The Respondent shall also sign any out-of-state written release/consent forms to authorize the Board to exchange with (i.e., disclose to and receive from) the out-of-state program verbal and written information concerning the Respondent, and to ensure that the Board is authorized to receive the medical records of the Respondent, including, but not limited to, mental health and drug and alcohol evaluation and treatment records. The Respondent shall not withdraw the release/consent; and

(g) 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

ORDERED that a violation of suspension constitutes a violation of this Consent Order;

and it is further

ORDERED that, after the Respondent has complied with all terms and conditions of the suspension, the minimum period of suspension imposed by this Consent Order has passed, and the Board receives MPRP's recommendation on whether it is safe for the Respondent to return to the practice of medicine, a Board disciplinary panel will determine whether the suspension is terminated. If a Board disciplinary panel determines that it is safe for the Respondent to return to the practice of medicine, the suspension will be terminated, and the disciplinary panel will issue

an order with the terms and conditions it determines are reasonable and appropriate, which may include probation and probationary terms and conditions. If, after considering MPRP's recommendation, the disciplinary panel determines that it is not safe for the Respondent to return to the practice of medicine, the suspension shall remain in effect under the terms and conditions the disciplinary panel finds reasonable and appropriate under the circumstances; and it is further

ORDERED that this Consent Order goes into effect upon the signature of the Executive Director of the Board or her designee. The Executive Director or her designee signs the Consent Order on behalf of Board Disciplinary Panel B; 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, 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 a 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 a 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 impose further suspension of the Respondent's medical license 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 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

10/18/2023
Date

Ellen Douglas Smith, Deputy Director
Maryland State Board of Physicians

CONSENT

I, Julia E. Olson, 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 its language and the meaning of its terms and conditions.

Signature On File

10/12/23
Date

Julia E. Olson, M.D.
Respondent

NOTARY

STATE OF Maryland

CITY/COUNTY OF Baltimore

I HEREBY CERTIFY that on this 12th day of October, 2023, before me, a Notary Public of the foregoing State and City/County, did personally appear Julia E. Olson, M.D. and made oath in due form of law that signing the foregoing Consent Order was her voluntary act and deed.

AS WITNESSTH my hand and seal.

Twana Hughes
Notary Public

My commission expires: 9/30/24

TWANA M. HUGHES
NOTARY PUBLIC
BALTIMORE COUNTY
MARYLAND
MY COMMISSION EXPIRES 09/30/20 24