

AMAN PATEL, D.O.

Mark Olszyk, M.D., Chair
Disciplinary Panel A
Maryland State Board of Physicians
4201 Patterson Avenue, 4th Floor
Baltimore, MD 21215-2299

Re: Permanent Surrender of License to Practice Medicine
Aman K. Patel D.O., License Number: H94067
Case Number: 2225-0050A

Dear Dr. Olszyk and Members of Disciplinary Panel A,

Please be advised that, pursuant to Md. Code Ann., Health Occ. ("Health Occ.") §14-403 (2014 Repl. Vol. & 2019 Supp.), I have decided to **PERMANENTLY SURRENDER** my license to practice medicine in the State of Maryland, License Number H94067 effective immediately. I understand that upon surrender of my license, I may not give medical advice or treatment to any individual, with or without compensation, and cannot prescribe medications or otherwise engage in the practice of medicine in the State of Maryland as it is defined in the Maryland Medical Practice Act (the "Act"), Health Occ. §§ 14-101 *et seq.* and other applicable laws. In other words, as of the effective date of this Permanent Letter of Surrender, I understand that the permanent surrender of my license means that I am in the same position as an unlicensed individual in the State of Maryland.

I understand that this Permanent Letter of Surrender is a **PUBLIC DOCUMENT**, and upon Disciplinary Panel A's ("Panel A") acceptance, becomes a **FINAL ORDER** of Panel A of the Maryland State Board of Physicians (the "Board").

I acknowledge that the Board initiated an investigation of my practice, and that Panel A summarily suspended my license on October 23, 2024 and issued disciplinary charges against me on October 28, 2024, alleging under Health Occ. § 14-404(a)(3) (i) and (ii) (is guilty of immoral and unprofessional conduct in the practice of medicine); Health Occ. § 1-212; and the Board's sexual misconduct regulations, COMAR 10.32.17 *et seq.* Specifically, Panel A alleged that I engaged in immoral and unprofessional conduct and sexual misconduct with multiple female office staff members with whom I worked as a locum tenens physician from January 2024 to May 2024. A copy of the Charging Document is attached to this letter as "Attachment 1." I have freely and voluntarily decided to permanently surrender my license to practice medicine in the State of Maryland to avoid further investigation and prosecution of these disciplinary charges.

Mark Olszyk M.D. and Members of Disciplinary Panel A

RE: Aman K. Patel D.O.

Permanent Letter of Surrender

Page 2

I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Permanent Letter of Surrender to avoid further prosecution of the disciplinary charges. I acknowledge that for all purposes related to medical licensure in Maryland, the charges will be treated as if proven.

I understand that by executing this Permanent Letter of Surrender I am waiving my right to a hearing to contest the disciplinary charges. In waiving my right to contest the charges, I am also waiving the right to be represented by counsel at the hearing, to confront witnesses, to give testimony, to call witnesses on my own behalf, and all other substantive and procedural protections provided by law, including the right to appeal to circuit court.

I understand that the Board will advise the Federation of State Medical Boards, and the National Practitioner Data Bank of this Permanent Letter of Surrender. I also understand that this Permanent Letter of Surrender is a public document and in the event I would apply for licensure in any form in any other state or jurisdiction that this Permanent Letter of Surrender may be released or published by the Board to the same extent as a final order that would result from disciplinary action, pursuant to Md. Code Ann., Gen. Prov. §§ 4-101 *et seq.* (2014), and that this Permanent Letter of Surrender constitutes a disciplinary action by Panel A.

I affirm that I will provide access to and copies of medical records to my patients in compliance with Title 4, subtitle 3 of the Health General Article. I also agree to surrender my Maryland Controlled Dangerous Substances Registration to the Maryland Office of Controlled Substances Administration.

I further recognize and agree that by submitting this Permanent Letter of Surrender, my license in Maryland will remain permanently surrendered. In other words, I agree that I have no right to reapply and will not reapply for a license to practice medicine in the State of Maryland. I further acknowledge that the Board is not obligated to consider any application for licensure or reinstatement that I might file at a future date.

I acknowledge that I may not rescind this Permanent Letter of Surrender in part or in its entirety for any reason whatsoever. Finally, I wish to make clear that I have been advised of my right to be represented by an attorney of my choice throughout proceedings before Panel A, including the right to consult with an attorney prior to signing this Permanent Letter of Surrender. I have consulted with and was represented by an attorney prior to signing this letter permanently surrendering my license to practice medicine in

¹ Upon Panel A's acceptance of this permanent Letter of Surrender, I acknowledge that the Order for Summary Suspension issued on October 23, 2024 and continued on November 7, 2024 is terminated as moot.

Mark Olszyk M.D. and Members of Disciplinary Panel A

RE: Aman K. Patel D.O.

Permanent Letter of Surrender

Page 3

Maryland. I understand both the nature of Panel A's actions and this Permanent Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning and terms and effect of this Permanent Letter of Surrender. I make this decision knowingly and voluntarily.

Very truly yours,

Signature On File

Aman K. Patel D.O.

5/20/2025

NOTARY

STATE OF Maryland
CITY/COUNTY OF Talbot

I HEREBY CERTIFY that on this 20th day of May, 2025 before me, a Notary Public of the City/County aforesaid, personally appeared Aman K. Patel D.O. and declared and affirmed under the penalties of perjury that the signing of this Permanent Letter of Surrender was a voluntary act and deed.

AS WITNESS my hand and Notarial seal.



Rayshawn M. Rich Vines
Notary Public

My commission expires: 9/20/27

Mark Olszyk M.D. and Members of Disciplinary Panel A

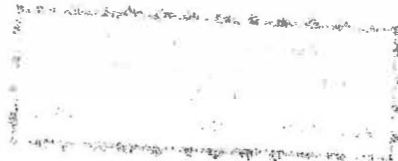
RE: Aman K. Patel D.O.

Permanent Letter of Surrender

Page 4

ACCEPTANCE

On behalf of Disciplinary Panel A, on this 25th day of June, 2025, I, Christine A. Farrelly, accept the **PUBLIC PERMANENT SURRENDER** of Aman K. Patel D.O.'s license to practice medicine in the State of Maryland.



Mark Olszyk M.D. and Members of Disciplinary Panel A

RE: Aman K. Patel D.O.

Permanent Letter of Surrender

Page 5

Signature On File

Christine A. Farrelly, Executive Director
Maryland Board of Physicians

Attachment 1

IN THE MATTER OF
AMAN K. PATEL, D.O.

Respondent

License Number: H94067

* BEFORE THE
* MARYLAND STATE
* BOARD OF PHYSICIANS
* Case Number: 2225-0050 A

* * * * *

CHARGES UNDER THE MARYLAND MEDICAL PRACTICE ACT

Disciplinary Panel A ("Panel A") of the Maryland State Board of Physicians (the "Board") hereby charges **AMAN K. PATEL, D.O.** (the "Respondent"), License Number H94067, under the Maryland Medical Practice Act (the "Act"), codified at Md. Code Ann., Health Occ. ("Health Occ.") §§ 14-101 *et seq.* (2021 Repl. Vol. & 2023 Supp.) and Md. Code Regs. ("COMAR") 10.32.17.01 *et seq.*

Disciplinary Panel A charges the Respondent with violating 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:

- (i) Immoral conduct in the practice of medicine; and
- (ii) Unprofessional conduct in the practice of medicine[.]

Health Occ. § 1-212. Sexual misconduct prohibited; regulations; discipline.

- (a) *Adoption of regulations.* – Each health occupations board authorized to issue a license or certificate under this article shall adopt regulations that:
 - (1) Prohibit sexual misconduct; and
 - (2) Provide for the discipline of a licensee or certificate holder found to be guilty of sexual misconduct.
- (b) For the purposes of the regulations adopted in accordance with subsection (a) of this section, “sexual misconduct” shall be construed to include, at a minimum, behavior where a health care provider:
 -
 - (3) Has engaged in any sexual behavior that would be considered unethical or unprofessional according to the code of ethics, or regulations of the appropriate health occupations board under this article.

The pertinent provisions of COMAR provide the following:

10.32.17.03 Sexual Misconduct.

- C. Sexual misconduct includes, but is not limited to:
 - (1) Engaging in sexual harassment of a patient, key third party, employee, student, or coworker regardless of whether the sexual harassment occurs inside or outside of a professional setting[.]

ALLEGATIONS OF FACT¹

Disciplinary Panel A bases its charges on the following facts that it has reason to believe are true:

I. BACKGROUND

1. At all times relevant hereto, the Respondent was and is licensed to practice medicine in the State of Maryland. The Respondent initially was licensed to practice medicine in Maryland on April 19, 2022, under License Number H94067. The Respondent's license is current through September 30, 2025.

2. The Respondent is licensed to practice medicine in all 50 states of the United States, and the District of Columbia and Guam.

3. The Respondent was employed as a locum tenens physician at a specific regional health care facility (the "Facility")² from around the end of January 2024 until his termination around the end of May 2024. The Respondent practiced interventional cardiology at this Facility's location in Maryland.

4. On or about June 3, 2024, the Board opened an investigation of the Respondent after receiving a Mandated 10-Day Report from the Facility stating that it had terminated the Respondent's employment after several female employees alleged that the

¹ The allegations set forth in these charges are intended to provide the Respondent with reasonable notice of the asserted facts. They are not intended as, and do not necessarily represent, a complete description of the evidence, either documentary or testimonial, to be offered against the Respondent in connection with these charges.

² For confidentiality and privacy purposes, the names of individuals and health care facilities involved in this case are not disclosed in this document. The Respondent may obtain the names of all individuals and health care facilities referenced in this document by contacting the administrative prosecutor.

Respondent “engaged in inappropriate conduct, including hugging female employees and other behavior that was harassing in nature.” On or about June 6, 2024, the Board received a complaint from a Facility staff member alleging that the Respondent sexually assaulted her.³

II. BOARD INVESTIGATION

5. The Board’s investigation revealed that from around April 2024 to around May 2024, the Respondent engaged in a pattern of sexual harassment of at least four female staff members (“Staff Members A, B, C and D”) at the Facility. The Respondent’s harassing conduct, which occurred at the Facility’s location, included, but was not limited to: sending inappropriate, and at times, sexually explicit, text messages to female staff members; hugging female staff members with excessive force and frequency; forcefully kissing female staff members’ face and neck area, in some instances, grabbing them by their hair; groping female staff members’ intimate body parts; exposing his genitals to female staff members; and having and/or attempting to have female staff members perform oral sex on him.

Staff Member A

6. Staff Member A was a female clinical staff member at the Facility’s location, who started working with the Respondent in or around mid-February 2024. The first day Staff Member A worked with the Respondent, the Respondent asked for a hug from her,

³ This particular Facility staff member is referred to as Staff Member D later in the order.

which she described as “a really tight squeeze.” Subsequently, Staff Member A worked with the Respondent at least two times per week, during which time the Respondent would frequently hug Staff Member A.

7. Beginning in or around late-February 2024, the Respondent began kissing Staff Member A without consent when they met in the hallway or in the Respondent’s office. As time went on, the Respondent’s harassing conduct became more aggressive. The Respondent would frequently pull Staff Member A’s head back by her hair and forcefully kissed her face and neck. The Respondent also began groping Staff Member A’s breasts and buttocks. On these occasions, Staff Member A would tell the Respondent to leave her alone, but the Respondent would refuse.

8. On or about April 30, 2024, around early afternoon, Staff Member A went to the Respondent’s office to discuss a patient and to drop off some paperwork. While Staff Member A was talking to the Respondent in his office, the Respondent got up and closed the door. The Respondent then pulled Staff Member A towards him and began kissing her neck in an aggressive manner and groping her breasts and buttocks. Staff Member A pushed the Respondent away, but he pulled her back towards him. At one point, the Respondent grabbed Staff Member A’s hair and pulled her head towards his genitals, which were exposed. Staff Member A attempted to push the Respondent away but was unable to do so. The Respondent then had Staff Member A perform oral sex on him. After the Respondent had finished, Staff Member A quickly left his room and went to a nearby bathroom to vomit. Later that day, the Respondent sent Staff Member A a sexually explicit text message regarding details of the incident in his office.

9. After April 30, 2024, the Respondent continued to aggressively kiss Staff Member A and grope her breasts and buttocks whenever they worked together. On or about May 21, 2024, Staff Member A was at her desk when the Respondent came up to her, pulled her hair and aggressively kissed her lips and groped her breasts. While kissing Staff Member A, the Respondent bit her lips, which left a cut and a bruise. Staff Member A fought off the Respondent by giving him a hard punch in the arm and telling him to leave her alone.

Staff Member B

10. Staff Member B was an administrative staff member at the Facility's location. As an administrative staff member, Staff Member B only had occasional interactions with the Respondent in the office. On or about April 25, 2024, the Respondent called Staff Member B to his office and gave her a hug. Staff Member B did not take offense to the hug until when the Respondent "proceeded to latch onto my face and begining[sic] trying to make out with me and that's[sic] when I froze up..." Staff Member B attempted to break away from the Respondent while telling him that she had a boyfriend, but the Respondent simply said, "one more minute." Staff member B attempted to push the Respondent away, but he pushed her against the wall while attempting to unzip his pants. Staff Member B was able to push the Respondent away and quickly leave his office.

11. Later that same day, on or about April 25, 2024, Staff Member B was alone in the telephone room when the Respondent entered and closed the door. Staff Member B initially thought the Respondent was going to apologize to her, when he "jumped onto me and shoved me right into the wall with his hand around my neck and trying to grope my

breasts as I looked him dead in the face and told him NO.” At that time, someone had knocked on the door, and the Respondent whispered to Staff Member B to “wait and be quiet.” Staff Member B waited a moment longer and quickly left the room to go home. Later that day, Staff Member B received a text message from the Respondent asking, “what are you doing tonight,” and stating, “I would love to have you and please keep things within you, you will feel good too.”

Staff Member C

12. Staff Member C was a clinical staff member at the Facility’s location. Staff Member C worked with the Respondent on one occasion, which occurred on May 2, 2024. On that day, Staff Member C was at her desk when she received a call from the Respondent asking if he could see her in his office. When Staff Member C went to the Respondent’s office, the Respondent told Staff Member C that he had been watching her, thought she was beautiful and offered to take care of her.

13. The Respondent proceeded to hug Staff Member C, at which time Staff Member C pushed him away and told him they were at work. The Respondent then grabbed Staff Member C, pulled her close to him, and started kissing her all over her neck. While doing so, the Respondent exposed his genitals and told her, “come handle some business for him, or take the stress off of him.” Staff Member C was able to leave the Respondent’s office before anything else happened.

Staff Member D

14. Staff Member D was a clinical staff member at the Facility’s location. Staff Member D worked with the Respondent when the Respondent began his employment at

the Facility. Initially, Staff Member D had a cordial working relationship with the Respondent and reported receiving two to three hugs from him per week, which Staff Member D thought were innocuous. On or about March 21, 2024, Staff Member D received a hug from the Respondent that was so tight that she received a bruise on her collarbone from the stethoscope she was wearing.

15. On or about April 26, 2024, at approximately 5:30 p.m., Staff Member D stopped in the Respondent's office to drop off some studies and discuss patient care with him. As Staff Member D was leaving the Respondent's office, he proceeded to hug her. When Staff Member D pushed him away, the Respondent grabbed Staff Member D's face and sucked intently on her lips. Staff Member D shook her head and attempted to leave the Respondent's office when the Respondent grabbed her wrist, pulled her close to him, and shut the door. The Respondent grabbed Staff Member D's face and began kissing her. Staff Member D shook her head and ran out of the Respondent's office to a nearby bathroom.

16. The Respondent again hugged Staff Member D, grabbed her face and began kissing her on or about the late afternoon of May 9, 2024, when Staff Member D went into his office to discuss patient care.

17. On or about May 16, 2024, in the late afternoon, Staff Member D stopped by the Respondent's office to drop off some electrocardiograms when the Respondent grabbed and squeezed Staff Member D's left breast, on which she recently had a medical procedure performed. Staff Member D screamed from the pain and kicked the Respondent in the left hip.

Respondent's Under-Oath Board Interview

18. On or about September 30, 2024, Board compliance analysts conducted an under-oath interview of the Respondent. The Respondent stated that it was in his culture to hug people and that he was merely trying to be friendly. During the interview, the Respondent disclosed that he had a romantic and sexual relationship with another Facility staff member, not Staff Members A, B, C, or D. When the Board compliance analyst asked the Respondent whether he had any sexual relationship with anyone else at the Facility, the Respondent answered "No."

19. Later in the interview, when asked whether he ever had a sexual encounter with Staff Member A, the Respondent stated, "Consensual, yes." The Respondent admitted that Staff Member A had performed oral sex on him in his office at the Facility. The Respondent further admitted that he had on more than one occasion pulled Staff Member A's hair, including on this occasion.

20. When asked about any incidents involving Staff Member B, the Respondent admitted to kissing her once in his office, during which his genitals were exposed. The Respondent further admitted that he later sent a text message to Staff Member B asking her to keep the incident "a secret."

21. When asked about any incidents involving Staff Member C, the Respondent admitted to kissing her during which his genitals were exposed. The Respondent further admitted that he and Staff Member C "had a kiss and she had a bruise, and it looks like people made a big deal."

22. Finally, when the Board compliance analyst asked the Respondent about Staff Member D, the Respondent admitted to kissing her “Maybe a couple of times...”

GROUND'S FOR DISCIPLINE

The Respondent's conduct, as set forth above, constitutes a violation of the following provisions of the Act and COMAR: Health Occ. § 14-404(a)(3)(i) – Is guilty of immoral conduct in practice of medicine; Health Occ. § 14-404(a)(3)(ii) – Is guilty of unprofessional conduct in the practice of medicine; and Health Occ. § 1-212 for violating the Board's sexual misconduct regulations under COMAR 10.32.17.03C(1).

NOTICE OF POSSIBLE SANCTIONS

If, after a hearing, Disciplinary Panel B of the Board finds that there are grounds for action under Health Occ. § 14-404(a)(3)(i), Health Occ. § 14-404(a)(3)(ii); Health Occ. § 1-212, and/or COMAR 10.32.17.03C(1), Disciplinary Panel B may impose disciplinary sanctions in accordance with the Board's regulations under Md. Code Regs. 10.32.02.10, including reprimanding the Respondent, placing the Respondent on probation, or suspending or revoking the Respondent's license, and may place the Respondent on probation, and/or may impose a monetary penalty.

NOTICE OF DISCIPLINARY COMMITTEE FOR CASE RESOLUTION

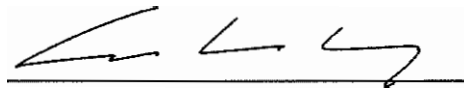
The Respondent may appear before Disciplinary Panel B, serving as the Disciplinary Committee for Case Resolution ("DCCR") in this matter, on **WEDNESDAY, JANUARY 15, 2024, at 9:00 A.M.**, at the Board's offices, 4201 Patterson Avenue, Baltimore, Maryland 21215. The nature and purpose of the DCCR is described in the attached letter to the Respondent. If this matter is not resolved before the DCCR, a

prehearing conference and hearing will be scheduled before an Administrative Law Judge at the Office of Administrative Hearings, 11101 Gilroy Road, Hunt Valley, Maryland 21031. The hearing will be conducted in accordance with the Administrative Procedure Act, Md. Code Ann., State Gov't §§ 10-201 *et seq.* (2021 Repl. Vol.).

ANTHONY G. BROWN
ATTORNEY GENERAL

10/28/2024

Date

A handwritten signature in black ink, appearing to read 'K. F. Michael Kao', written over a horizontal line.

K. F. Michael Kao
Assistant Attorney General
Office of the Attorney General
Health Occ. Prosecution & Litigation
300 West Preston Street, Suite 201
Baltimore, Maryland 21201