Christopher Kiger, RCP

Date: 9/20/20/8

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

> Re: Surrender of Respiratory Care License Christopher Kiger, RCP License Number: L01878

Case Number: 2218-0267 A

Dear Dr. Bhandari and Members of Disciplinary Panel A,

Please be advised that, pursuant to Md. Code Ann., Health Occ. ("Health Occ.") §14-5A-16 (2014 Repl. Vol. & 2017 Supp.), I have decided to **SURRENDER** my license to practice respiratory care in the State of Maryland, License Number L01878, effective immediately. I understand that upon surrender of my license, I may not, with or without compensation, practice respiratory care in the State of Maryland as it is defined in the Maryland Respiratory Care Practitioners Act (the "Act"), Health Occ. § 14-5A-01(h) and other applicable laws. In other words, as of the effective date of this Letter of Surrender, I understand that the 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 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 on my 2018 respiratory care practitioner renewal application, I answered "yes" to a character and fitness question, indicating that my employment as a respiratory care practitioner was terminated, and that the Board initiated an investigation. As part of the Board's investigation, I submitted to an evaluation to determine my fitness to practice respiratory care. The evaluation, in part, revealed concerns regarding my fitness to practice respiratory care. I have decided to surrender my license to practice respiratory care in the State of Maryland to avoid further investigation and prosecution concerning the circumstances of my termination and the results of the evaluation. I recognize that for all purposes relevant to my respiratory care licensure that these allegations shall be treated as proven and that these allegations support a conclusion that I violated Health Occ. § 14-5A-17(a)(4), (professionally, physically, or mentally incompetent).

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I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Letter of Surrender to avoid the issuance of charges. I understand that by executing this Letter of Surrender I am waiving my right to contest any charges that would issue from Panel A's investigative findings in a formal evidentiary hearing at which I would have had the right to counsel, 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, the National Practitioner Data Bank, and the Healthcare Integrity and Protection Data Bank of this Letter of Surrender. I also understand that in the event I would apply for licensure in any form in any other state or jurisdiction that this 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 Repl. Vol. & 2017 Supp.), and that this Letter of Surrender constitutes a disciplinary action by Panel A.

I further recognize and agree that by submitting this Letter of Surrender, my license will remain surrendered unless and until Panel A grants reinstatement. In the event that I apply for reinstatement of my Maryland License, I understand that Panel A or its successor is not required to grant reinstatement; and, if it does grant reinstatement, may impose any terms and conditions the disciplinary panel considers appropriate for public safety and the protection of the integrity and reputation of the profession. I further understand that if I ever file a petition for reinstatement, I will approach Panel A or its successor in the same position as an individual whose license has been revoked.

I acknowledge that I may not rescind this 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 Letter of Surrender. I have knowingly and willfully waived my right to be represented by an attorney before signing this letter surrendering my license to practice respiratory care in Maryland. I understand both the nature of Panel A's actions and this Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning and terms and effect of this Letter of Surrender. I make this decision knowingly and voluntarily.



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NOTARY

STATE OF MD CITY/COUNTY OF Wastminster (Caroll)

I HEREBY CERTIFY that on this day of day of

AS WITNESS my hand and Notarial seal.

Notary Public

My commission expires: 61-10-2022

ACCEPTANCE

On behalf of Disciplinary Panel A, on this 24 day of September, 2018, I, Christine A. Farrelly, accept the **PUBLIC SURRENDER** of Christopher Kiger's license to practice respiratory care in the State of Maryland.

Christine A. Farrelly, Executive Director

Maryland Board of Physicians