

IN THE MATTER OF	*	BEFORE THE
EVA C. DICKINSON, M.D.	*	MARYLAND STATE
Respondent	*	BOARD OF PHYSICIANS
License Number: D57476	*	Case Number: 2017-0162A
* * * * *	*	* * * * *

**ORDER FOR SUMMARY SUSPENSION OF LICENSE TO PRACTICE MEDICINE**

Disciplinary Panel A ("Panel A") of the Maryland State Board of Physicians (the "Board") hereby **SUMMARILY SUSPENDS** the license of **EVA C. DICKINSON, M.D.** (the "Respondent"), License Number D57476, to practice medicine in the State of Maryland.

Panel A takes such action pursuant to its authority under Md. Code Ann., State Gov't II ("State Gov't II") § 10-226(c)(2) (2014 Repl. Vol. and 2015 Supp.), concluding that the public health, safety or welfare imperatively requires emergency action.

**INVESTIGATIVE FINDINGS**

Based on information received by, and made known to Panel A, and the investigatory information obtained by, received by and made known to and available to Panel A, including the instances described below, Panel A has reason to believe that the following facts are true:<sup>1</sup>

**Licensure Information/Background**

1. At all times relevant hereto, the Respondent was and is licensed to practice medicine in the State of Maryland. The Respondent was originally licensed to

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<sup>1</sup> The statements regarding the Respondent's conduct are intended to provide the Respondent with notice of the basis of the summary suspension. 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 this matter.

practice medicine in Maryland on April 27, 2001, under License Number D57476. The Respondent's medical license is currently active and is scheduled for renewal on September 30, 2018. The Respondent is also licensed to practice medicine in the State of Delaware.

2. The Respondent is board-certified in emergency medicine.

3. The Respondent maintains a medical office in Harrington, Delaware. The Respondent also provides medical care and sees patients at her Maryland residence.

### **Police investigation/Criminal charges**

4. In or around September 2016, the Maryland State Police ("MSP") received information that caused it to obtain a search and seizure warrant (the "Warrant") for the Respondent's residence, which is located in Maryland.

5. MSP officers, acting in conjunction with the Caroline County Drug Task Force, executed the Warrant on September 12, 2016. Upon entering the residence, MSP officers detected the overwhelming odor of raw marijuana. Marijuana is a Schedule I controlled dangerous substance ("CDS").

6. MSP officers found the Respondent upstairs in a makeshift laboratory area of the residence. MSP officers searched the Respondent and found an unlabeled pill bottle in her pocket that contained a variety of Schedule II opioid-containing pills (32 oxycodone pills, 35 morphine pills, 6 Hysingla pills, 9 hydromorphone pills, 6 Nucynta pills); and a prescription-only medication (4 Vyvanse pills).

7. The MSP search found two marijuana growing operations in the Respondent's master bedroom on the first floor. The main growing operation was located in the open area of the bedroom and was housed in a tent-style structure. It

was equipped with a watering source, grow lights and fans, with three healthy, two-to-three foot tall marijuana plants growing in buckets. The other growing operation was found in the bedroom closet. It was equipped with grow lights, fans and a watering system, and contained six marijuana plants. Next to the bed in the master bedroom were seven additional marijuana plants, all of which were approximately less than one inch tall. These plants were growing in an herbal starter kit equipped with lighting and a watering system. Police also recovered a notebook containing what appeared to be marijuana growing notes, and eight zip lock packets of suspected marijuana seeds from the bedroom.

8. Police searched the exterior of the Respondent's residence and found nine additional marijuana plants growing in pots at or around a detached garage that was on the premises. All of the marijuana plants appeared to be healthy and well-maintained.

9. Police searched the upstairs laboratory area and found three gallon-size zip lock bags containing marijuana plant material on a table. Located inside the rear closet of the laboratory was another unlabeled pill bottle that contained approximately 140 Tramadol pills, a narcotic analgesic and Schedule IV CDS; and 3 Tizanidine pills (Tizanidine is a muscle relaxant and prescription-only medication). In that closet, police also found an unlabeled pill bottle containing approximately 76 Lyrica pills (Lyrica is a Schedule V CDS and an anti-seizure medication that is sometimes prescribed for neuropathic pain) and 36 gabapentin pills (gabapentin is a prescription-only medication prescribed for neuropathic pain). Located in the mini-refrigerator were three boxes of "Belladonna-Opium" suppositories (each containing approximately 35 dosages), a

Schedule II CDS. These suppositories were prescribed to an individual who does not reside at the residence.

10. Located in the bathroom area of the laboratory was a large wooden box containing many empty Fentanyl sublingual spray applicators. Fentanyl is a Schedule II CDS and opioid medication.

11. MSP officers arrested the Respondent for various drug offenses and transported her to the Caroline County Sheriff's Office for processing.

12. On November 9, 2016, the Respondent was charged pursuant to a Criminal Information in the Circuit Court for Caroline County with the following: one count of manufacturing a Schedule I CDS (marijuana), a felony, in violation of Md. Code Ann., Crim. Law ("Crim. Law") § 5-603; one count of possession of a Schedule II CDS (Belladonna and opium), a misdemeanor, in violation of Crim. Law § 5-601(a)(1); one count of possession of a Schedule I CDS (marijuana), a misdemeanor, in violation of Crim. Law § 5-601(a)(1); one count of possession of a Schedule IV CDS (Tramadol), a misdemeanor, in violation of Crim. Law § 5-601(a)(1); one count of possession of a Schedule II CDS (oxycodone), a misdemeanor, in violation of Crim. Law § 5-601(a)(1); and one count of possession of a Schedule II CDS (morphine), a misdemeanor, in violation of Crim. Law § 5-601(a)(1). These criminal charges are pending.

### **Subsequent Board investigation**

13. The Board initiated an investigation of the Respondent based on the above information. On October 28, 2016, Board staff interviewed an individual

("Individual A")<sup>2</sup> who had information about the Respondent. Individual A stated that on or about September 8, 2016, he/she observed "grow rooms" in the master bedroom of the Respondent's residence, which he/she photographed and provided to Board staff. Individual A stated that after making these observations, he/she reported the matter to the police. Individual A stated that he/she never observed the Respondent use marijuana but did witness her using "narcotic pills" and described her as an "addict." Individual A stated that the Respondent writes prescriptions for opioids for a "friend," who shares the prescriptions with her. Individual A stated that he/she had knowledge that the Respondent has accepted the remainder of narcotics prescriptions from patients and reconstituted them in her Maryland residence into a different form for sale. Individual A also stated that one of the Respondent's former employees told him/her that the Respondent takes used Fentanyl sublingual spray packaging home and ingests the residual drug out of the spray applicator.

14. On November 17, 2016, Board staff scheduled an interview with the Respondent. The Respondent arrived more than one hour late for the interview. As a result, Board staff rescheduled the interview and instructed the Respondent to go to a specific medical laboratory for toxicology testing at 1:00 p.m. Board staff provided the Respondent with printed directions to the laboratory, which was approximately 12 miles from the Board's office. The Respondent arrived at the laboratory more than two hours late for her appointment. During that time, Board staff had multiple telephone conversations with the Respondent, who sounded confused and disoriented. The Respondent underwent testing that was positive for the presence of Fentanyl,

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<sup>2</sup> For confidentiality purposes, the names of all individuals referenced herein, other than the Respondent, will not be disclosed in this document. The Respondent may obtain the identity of any individual referenced herein by contacting the assigned administrative prosecutor.

oxymorphone and oxycodone.

15. On November 28, 2016, Board staff interviewed the Respondent, who appeared approximately two hours late for the interview. The Respondent claimed that she was delayed because she had filed a police report for a break-in at her home the previous night and that she had been "attacked." Board staff questioned the Respondent about her delay in appearing for her toxicology screening. The Respondent provided a series of explanations that included being unable to find the person who drove her to the Board, stopping to eat, losing the directions to the laboratory, and getting lost.

16. Board staff questioned the Respondent about whether her toxicology screening would come back positive for any substances. The Respondent initially replied no, but then stated that depending on how sensitive the hair test she underwent was, she may test positive for Fentanyl, claiming that she had used a prescribed patch for knee pain. The Respondent also stated that she did take "a couple of oxycodones" too.

17. The Respondent stated that although her medical office was in Delaware, she also provided medical care and treatment to patients at her Maryland residence. The Respondent cited one instance in which an individual stopped by her residence because he "needed his prescription changed." Board investigation noted other evidence that the Respondent practiced medicine in Maryland, including reports that she kept patient files in her residence and personal vehicle. In addition, pharmacy surveys indicate that the Respondent prescribed extensive amounts of CDS and prescription medications in Maryland. The Respondent also admitted to police that she

saw patients at her Maryland residence.

18. The Board's investigation determined that the Respondent made inconsistent statements regarding her knowledge of the CDS and marijuana that police recovered as a result of the execution of the Warrant at her residence. In a written submission to the Board, the Respondent claimed that the evidence against her was "pointing to a conspiracy" and that she has "never sold, grown or used marijuana." Likewise, in her Board interview, the Respondent stated that she knew nothing about the marijuana that was growing in and around her home, and that the marijuana police found there was "planted" by someone with an animus against her. Also, when interviewed during her arrest, the Respondent stated that she did not know what marijuana "looks or smells like." Board investigators, however, found an on-line news article that described the Respondent as a medical advisor for a group that was "hoping to get licensed to grow medical cannabis." In a video that accompanied the article, the Respondent stated that she was involved in an ongoing project to grow cannabis with aeroponics and that she was focusing on researching the use of cannabis in pain management. In addition, during her Board interview, the Respondent addressed the numerous plants found in the master bedroom by stating that she never went into the "bedroom where they do the grow." Police reports, however, document that the Respondent's name was affixed to the door of the master bedroom, and that she kept articles of clothing, family photographs and packages addressed to her in the room.

19. The Respondent also provided several explanations for the CDS that police recovered. For example, she stated that the oxycodone and morphine police recovered from her pocket during the execution of the Warrant belonged to a friend who

was traveling with the pill containers. She stated that the Tramadol was prescribed for her dog, although she stated to police that they were samples she no longer used in her practice. The Respondent also stated that a patient gave her the Belladonna-Opium suppositories for her to destroy them, which she had forgotten to do. The Respondent also claimed that she possessed the Fentanyl containers because she was "a big recycler repurposer."

20. Based on the above investigative facts, the Respondent presents a substantial likelihood of a risk of serious harm to the public health, safety and welfare. The Respondent is currently facing felony CDS manufacturing charges and misdemeanor CDS possession charges. The CDS possession charges involve, *inter alia*, the possession of Schedule II opioid medications. During the Board's investigation, the Respondent exhibited erratic, impaired and aberrant behaviors, and in toxicology testing, tested positive for multiple opioid medications.

### **CONCLUSIONS OF LAW**

Based upon the foregoing Investigative Findings, Panel A of the Board concludes that the public health, safety, or welfare imperatively requires emergency action, and that pursuant to State Gov't II § 10-226(c)(2), the Respondent's license is immediately suspended.

### **ORDER**

**IT IS** by a vote of Panel A of the Board, hereby:

**ORDERED** that pursuant to the authority vested in Panel A by State Govt. II § 10-226(c)(2) (2014 Repl. Vol. and 2015 Supp.), the Respondent's license to practice medicine in the State of Maryland be and is hereby **SUMMARILY SUSPENDED**; and



it is further

**ORDERED** that in accordance with Md. Code Regs. 10.32.02.08B(7), a post-deprivation initial hearing on the summary suspension will be held on **Wednesday, January 11, 2017, at 9:00 a.m.** at the Board's offices, located at 4201 Patterson Avenue, Baltimore, Maryland, 21215-0095; and it is further

**ORDERED** that at the conclusion of the **SUMMARY SUSPENSION** hearing before Panel A, the Respondent, if dissatisfied with the result of the hearing, may request, within ten (10) days, an evidentiary hearing, such hearing to be set within thirty (30) days of the request, before an Administrative Law Judge at the Office of Administrative Hearings, Administrative Law Building, 11101 Gilroy Road, Hunt Valley, Maryland 21031-1301; and it is further

**ORDERED** that upon receipt of this Order, the Respondent **SHALL SURRENDER** to Board staff the following items:

- (1) her original Maryland license D57476; and
- (2) Any renewal, wallet card or wall certificate.

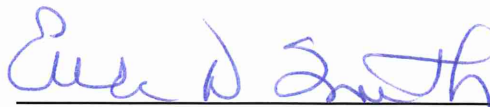
**AND IT IS FURTHER ORDERED** that Respondent shall provide patients with access to and copies of medical records upon request and shall have a continuing duty, on proper request, to provide details of a patient's medical record to a patient, another physician or a hospital in accordance with Title 4, subtitle 3 of the Health General Article; and it is further

**ORDERED** a copy of the Order of Suspension shall be filed with Panel A immediately in accordance with Health Occ. II § 14-407 (2014 Repl. Vol.); and it is further

**ORDERED** that this is an Order of Panel A, and as such, is a **PUBLIC DOCUMENT** pursuant to Md. Code Ann. Gen Prov. §§ 4-101 *et seq.* (2014).

12/28/16

Date



Ellen Douglas Smith, Deputy Director  
Maryland State Board of Physicians