IN THE MATTER OF	*	**BEFORE THE**
TERRI L. HILL, M.D.	*	**MARYLAND STATE**
Respondent	*	**BOARD OF PHYSICIANS**
License No.: D42191	*	**Case No.: 2221-0106**

* *

CONSENT ORDER

On July 22, 2021, Disciplinary Panel B ("Panel B") of the Maryland State Board of Physicians (the "Board") charged **TERRI L. HILL, M.D.** (the "Respondent"), License Number D42191, under the Maryland Medical Practice Act (the "Act"), Md. Code Ann., Health Occ. §§ 14-101 *et seq.* (2014 Repl. Vol. & 2020 Supp.). Panel B charged the Respondent with violating the following provision 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.

On September 15, 2021, Panel B was convened as a Disciplinary Committee on Case Resolution ("DCCR") in this matter. Based on negotiations occurring as a result of the DCCR, the Respondent agreed to enter into this Consent Order, consisting of the following Findings of Fact, Conclusions of Law, Order, and Consent.

FINDINGS OF FACT

Panel B finds:

BACKGROUND

1. At all relevant times, the Respondent has been licensed to practice medicine in Maryland. The Respondent was first licensed in Maryland on or about August 26, 1991, under License Number D42191. Her license is active through September 30, 2022, subject to renewal.

2. The Respondent is board-certified in plastic surgery. At all relevant times, the Respondent practiced as a solo practitioner in Maryland. She holds surgical privileges at three hospitals and routinely performs surgeries at an ambulatory surgery center in Glen Burnie, Maryland (the "Surgery Center").[1]

3. At all relevant times, the Respondent served as a Delegate in the Maryland House of Delegates.

COMPLAINT & BOARD INVESTIGATION

4. On or about March 23, 2021, the Board received a complaint alleging that the Respondent had participated in two Maryland General Assembly committee meetings by videoconference while simultaneously performing surgery.[2] The complainant did not have direct knowledge of the incidents but instead cited a newspaper article that described the Respondent's conduct.

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[1] To maintain confidentiality, the names of all facilities, patients, witnesses, and employees will not be disclosed in this document but have been provided to the Respondent.

[2] During the 2021 legislative session, in light of the ongoing Covid-19 pandemic, the Maryland General Assembly conducted public meetings and hearings through a videoconferencing platform. The public was able to live stream these meetings and hearings. Recordings of these meetings and hearings remain publicly available through the Maryland General Assembly's website.

5. The Board opened an investigation into the Respondent following its receipt and review of the complaint. The relevant details of the Board's investigation are described in Paragraphs 6 – 18, below.

The Respondent's Initial Response

6. On or about March 25, 2021, the Board notified the Respondent that it had opened an investigation into her conduct and requested her written response. The Board received the Respondent's response on or about April 5, 2021. In it, the Respondent explained the following:

a. She attended two legislative committee meetings by videoconference on February 19, 2021, and March 12, 2021. Her attendance at the February 19 meeting included her "testimony . . . for less than three minutes." Her attendance at the March 12 meeting was "limited to listening to the discussion" for approximately one hour.

b. She explained that, just prior to the surgeries, each patient "gave permission" for the Respondent to join the committee meeting during their surgeries.

c. She had asked through her legislative staff that her attendance at the February 19 meeting be at the end of the meeting, which would be "at the end of the case, during the closure, a more rote, less demanding part of the case."[3] She left the March 12 videoconference meeting when "the surgery was at a point when [the Respondent] judged [her] focus needed to be narrowed as we prepared to end the case and awaken [the] patient."

d. When deciding to join the videoconference meetings, she did not consider the "public's interest in having confidence in how medicine is practiced in the operating room[.]"

[3] The Respondent noted elsewhere in her response that the surgery on February 19, 2021 "took 2 hours longer than scheduled because two undetected hernias were found intraoperatively and required repair."

The February 19, 2021 Surgery & Videoconference

7. As part of its investigation, the Board obtained relevant medical records for a patient ("Patient 1") on whom the Respondent performed surgery on February 19, 2021, at a regional hospital (the "Hospital"). The records show that the Respondent performed major abdominal surgery on Patient 1.

8. Patient 1's preoperative consent forms do not document consent for or notice of the Respondent's anticipated participation in a legislative committee meeting during the surgery.

9. At approximately 3:05 p.m. on February 19, 2021, the Respondent joined an Environment and Transportation Committee meeting by videoconference. Her video feed focused on her face with a solid blue background that the videoconference platform added behind her. The Respondent wore a surgical gown, facemask, and surgical cap. Soon after the Respondent joined, the Committee Chair questioned, "Are you at work? What's going on here?" The Respondent replied, "I'm at work, yes. You're at work. I'm at work." The Respondent then spoke for approximately three minutes to introduce a bill she sponsored. She disconnected from the meeting upon finishing her introduction.

10. On or about May 11, 2021, Board staff interviewed Patient 1. She did not recall the Respondent asking her about participating in a legislative committee meeting by videoconference during the surgery. Patient 1 also said that it was a little discomforting that attention was taken away from her during the surgery.

11. On or about April 30, 2021 and June 8, 2021, Board staff interviewed a physician assistant (the "Physician Assistant") who was present during Patient 1's surgery on February 19, 2021. She said that she entered the operating room to assist the Respondent

and a surgical resident suture Patient 1's incision. According to the Physician Assistant, during the suturing process a nurse told the Respondent that she was getting a phone call, and the Respondent said that she needed to take it. The Respondent stepped back from the operating room table, spoke on the phone "for a few minutes," then returned to the table. The Physician Assistant said that she has never experienced a surgeon conduct a video call during a surgery.

The March 12, 2021 Surgery & Videoconference

12. As part of its investigation, the Board obtained relevant medical records for a patient ("Patient 2"), on whom the Respondent performed surgery on March 12, 2021 at the Surgery Center. The records show that the Respondent performed major abdominal and back surgery on Patient 2.

13. Patient 2's preoperative consent forms do not document consent for or notice of the Respondent's anticipated participation in a legislative committee meeting during the surgery.

14. At approximately 5:03 p.m. on March 12, 2021, the Respondent joined the Health and Government Operations Committee voting session by videoconference. The Respondent's camera was angled upward, focused on surgical lights and the ceiling, though it was occasionally shifted. The top of the Respondent's head and shoulders were visible in the lower part of the video feed. The Respondent wore a surgical gown, facemask, and surgical cap. She was positioned under the surgical lights, focused downward, and would occasionally shift, reach for surgical instruments, or adjust the lights. At times, other operating room staff members could be seen in the video feed. The Respondent and other operating room staff occasionally moved surgical equipment and blood-stained towels so

that they were briefly visible on the video feed. The Respondent disconnected from the videoconference at approximately 6:00 p.m. Voting records for the session show that the Respondent cast a "yea" vote for all 14 bills presented.[4]

15. On or about May 7, 2021, Board staff interviewed the circulating nurse (the "Circulating Nurse") present for Patient 2's surgery on March 12, 2021. The Circulating Nurse explained that at approximately 5:00 p.m. the Respondent directed her how to open the Respondent's smartphone and log on to the videoconference. The Respondent then told the Circulating Nurse where to place the phone and how to mute it. The Circulating Nurse said that she taped the phone to surgical equipment and angled it upward so that the patient could not be seen. The Circulating Nurse explained that she felt uncomfortable about the situation but also felt as though she, as the nurse, could not tell the physician what to do.

16. On or about May 11, 2021, Board staff interviewed Patient 2. She explained that 10 minutes before the surgery was scheduled to begin, the Respondent told Patient 2 about the committee meeting and that it would be held by videoconference during the surgery. Patient 2 said that she agreed to the Respondent participating in the meeting by videoconference during the surgery.

17. On or about May 19, 2021, Board staff interviewed a certified registered nurse anesthetist (the "CRNA") who was present during Patient 2's surgery. The CRNA said that the Respondent announced when entering the operating room that she had to join a videoconference meeting, which the CRNA found "unusual." According to the CRNA,

[4] Ten of the 14 votes during the March 12, 2021 voting session were unanimous. The remaining four bills passed by votes of 22-2, 18-6, 17-7, and 16-8.

at around 5:00 p.m., the Respondent told the Circulating Nurse to join a videoconference using a smartphone and set it up within the Respondent's view. The CRNA said that he was behind a drape preparing to lighten Patient 2's anesthesia at the time the Respondent joined the meeting.

Interview of the Respondent

18. On or about May 27, 2021, Board staff interviewed the Respondent under oath. In addition to reiterating statements made in her written response, the Respondent, among other things, stated the following:

a. Her attendance at the two committee meetings at issue was not required. She was the sponsor of a bill being presented on February 19, 2021, and the sponsor must either present the bill or "make arrangements if they can't be there." The March 12, 2021 session was a voting session and being excused from such a session is "not a big deal."

b. During her testimony on February 19, 2021, the Respondent took a few steps back from the operating table and turned away from the sterile field. Her phone was resting on a piece of equipment outside the sterile field. When she finished speaking, she re-gowned and re-gloved before reentering the sterile field.

c. She had a blue "background screen" during the February 19 videoconference, but she was unsure how that feature was set up. Respondent was the only person visible on the videoconference.

d. She told Patient 1 that there was a possibility she might have to "take a call" during the surgery. When questioned about Patient 1's inability to recall that conversation, the Respondent said that "there was a lot going on, getting the patient to the hospital, getting them to the OR. I'm sure she was nervous."

e. She did not postpone Patient 1's surgery because it was "pretty important to that patient" and "was [a] hard case to get time for."

f. On March 12, 2021, her staff sent a notice to the committee chair that the Respondent "would not be likely attending the voting session unless the

[surgical] case went particularly fast." The Respondent realized that she was familiar with the bills scheduled for a vote and "didn't have to speak, talk, participate, or do anything. . . . [T]hey just need you to be present" to cast a vote. The Respondent then asked Patient 2 "right before surgery" if she (the Respondent) could participate in the videoconference meeting. Patient 2 agreed, and the Respondent participated.

g. She contacted the Surgery Center's medical director after she learned of news reports about her conduct. The medical director was "very upset" and made it clear to the Respondent that "it was never to happen again."

h. She did not appreciate the "sanctity" of the operating room to the public and now understands "the idea of . . . don't invite the public into . . . the operating room."

CONCLUSION OF LAW

Based on the foregoing Findings of Fact, Panel B concludes as a matter of law that the Respondent is guilty of unprofessional conduct in the practice of medicine, in violation of Health Occ. § 14-404(a)(3)(ii).

ORDER

It is thus, by Disciplinary Panel B of the Board, hereby:

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

ORDERED that, within **ONE YEAR** from the effective date of this Consent Order, the Respondent shall pay a civil fine of **FIFTEEN THOUSAND DOLLARS ($15,000)**. 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 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 the Respondent is responsible for all costs incurred in fulfilling 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 & 2020 Supp.).

10/19/2021
Date

Signature on File

Christine A. Farrelly
Executive Director
Maryland Board of Physicians

CONSENT

I, Terri L. Hill, 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

10/16/2021
Date

Terri L. Hill, M.D.
License No. D42191

NOTARY

STATE OF Maryland

CITY / COUNTY OF Howard

I HEREBY CERTIFY that on this 16th day of October 2021, before me, a Notary Public of the foregoing State and City/County, personally appeared Terri L. Hill, M.D., and made oath in due form of law that signing the foregoing Consent Order was her voluntary act and deed.

AS WITNESSETH my hand and notarial seal.

Lyuba L. Thornton
NOTARY PUBLIC
Howard County
MARYLAND
MY COMMISSION EXPIRES June 3, 2023

Lyuba L Thornton
Notary Public

My commission expires: 6/3/23