## Blake Kalkstein, D.C. License Number S03735

Sharon J. Oliver, MBA Board Chair Maryland State Board of Chiropractic Examiners 4201 Patterson Avenue Baltimore, MD 21215

Re: Surrender of License to Practice Chiropractic

License Number: S03735 Case Numbers: 22-14C

Dear Ms. Oliver and Members of the Board:

Please be advised that, pursuant to Md. Code Ann., Health Occ. § 3-312 (2021 Repl. Vol. & 2022 Supp.) I have decided to SURRENDER my license to practice chiropractic, in the State of Maryland, License Number S03735, effective immediately. I understand that upon the surrender of my license, I may not provide chiropractic, with or without compensation, and cannot otherwise engage in the practice of chiropractic in Maryland as it is defined in the Maryland State Board of Chiropractic Examiners (the "Act"), Health Occ. §§ 3-101 et seq. 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 and non-certified individual in the State of Maryland.

I understand that this Letter of Surrender is a PUBLIC DOCUMENT, and upon acceptance by the Maryland State Board of Chiropractic Examiners (the "Board"), becomes a FINAL ORDER of the Board.

I acknowledge that the Board initiated an investigation into my practice, and, on March 14, 2024 the Board issued a *Notice of Intent to Revoke Licensure* (the "Notice") against me under Health Occ. § 3-313(a)(5) (is convicted of or pleads guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside). The Board's investigation found that I pled guilty to and was found guilty of Sexual Assault Child, a second-degree felony, in Cause Number 22-DCR-100085 and Possession of Child Pornography, a third-degree felony, in Cause Number 22-DCR-100683 in the 400th District Court in Richmond, Texas. I was sentenced to fifteen (15) years incarceration with credit for 513 days in Cause Number 22-DCR-100683.

I wish to make it clear that I have voluntarily, knowingly, and freely chosen to submit this Letter of Surrender to avoid any further investigation and prosecution of the allegations set forth in the Notice. I agree that if the Board were to proceed with an evidentiary hearing in this matter, the State would be able to prove the foregoing violations of the Act by a preponderance of the evidence. I acknowledge that for the purposes related to my license, the charges and allegations of

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fact in the Notice shall be treated as if proven and that these allegations support a conclusion that I violated the Act as detailed herein.

I understand that by executing this 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 release this Letter of Surrender to any appropriate database regulating chiropractors. I also understand 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 extend as a final order that would resolute from disciplinary action, pursuant to Md. Code Ann., Gen. Prov. § 4-101 et seq. (2014), and that this Letter of Surrender constitutes disciplinary action by the Board.

I further recognize and agree that by submitting this Letter of Surrender, my license will remain surrendered unless and until the Board grants reinstatement. I understand I will not apply for reinstatement and the Board will not consider a petition for reinstatement for a period of five years following my release from incarceration. In the event that I apply for reinstatement of my Maryland license after this period, I understand that the Board is not required to grant reinstatement; and, if it does grant reinstatement, may impose any terms and conditions the Board considers appropriate for public safety and the protection of the integrity and reputation of the profession. I further understand that if I file a petition for reinstatement, I will approach the Board in the same position as an individual whose license has been revoked.

I hereby affirm that I have terminated any employment as a chiropractor the State of Maryland.

I agree that on or before the effective date of this Letter of Surrender, I shall present to the Board my original Maryland certificate (License Number S03735), including any wall certificates, renewal certificates, and/or any wallet-sized renewal cards.

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 the Board, 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 permanently surrendering my license to practice in Maryland. I understand both the nature of the Board'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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Sincerely,

09/14/2024 Date Mes. B. Lun P.O.W.

Blake Kalkstein, D.C.

POWER OF ATTORNEY

## **NOTARY**

STATE OF Maryland

CITY/COUNTY OF Boltimore

I HEREBY CERTIFY that on this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_, 2024 before me, a Notary Public of the City/County aforesaid, personally appeared Blake Kalkstein, and declared and affirmed under the penalties of perjury that the signing of this Letter of Surrender was their voluntary act and deed.

AS WITNESS my hand and Notarial seal.

AUBLIC ON TARK

Notary Public

My commission expires: 40/8/25

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## **ACCEPTANCE**

On behalf of the Maryland State Board of Chiropractic Examiners, on this 30TH day of SEPTEMBER, 2024, I hereby accept the PUBLIC SURRENDER of Blake Kalkstein's license to practice chiropractic in the State of Maryland.

Sharon J. Oliver, MBA Board Chair

Maryland State Board of Chiropractic Examiners