

LETTER OF SURRENDER  
JAMES M. RYAN, License No. 15133

# JAMES M. RYAN, D.D.S.

## License No. 15133

Dr. Arpana Verma, D.D.S.  
President, Maryland State Board of Dental Examiners  
55 Wage Avenue/Tulip Drive  
Catonsville, MD 21228

RE: Surrender of License to Practice as a Dentist  
License Number 15133  
Board Case Number 2022-142

Dear Dr. Verma:

I agree to voluntarily surrender my license to practice as a dentist in the State of Maryland, license number 15133, to the Maryland State Board of Dental Examiners (the "Board"). I understand that I may not practice as a dentist, with or without compensation, as it is defined in the Maryland Dentistry Act (the "Act"), Md. Code Ann., Health Occ. ("H.O.") § 4-101 *et seq.* and the Board's regulations, COMAR 10.44.01 *et seq.* In other words, as of the effective date of this Letter of Surrender, I understand that I am in the same position as an individual who is not licensed to practice as a dentist. I understand that this Letter of Surrender shall become a **PUBLIC** document and shall become effective on the date of the Board's acceptance of this Letter of Surrender. I agree that this letter may be released or published by the Board as a final decision and order under H.O. 1-607 as well as the Public Information Act, Md. Code Ann., General Provisions §§ 4-101 *et seq.*

The decision to surrender my license stems from the fact that, on or about March 21, 2022, I was criminally charged with, among other charges, Murder in the Second Degree and multiple counts of CDS-Possession with the Intent to Distribute. Specifically, it is alleged that, over the course of several months, I diverted controlled dangerous substances, including Ketamine, Midazolam, Propofol, and Diazepam, from my practice and distributed them to my girlfriend, who developed a serious addiction to those substances. It is further alleged that the distribution of some of these drugs to her was the proximate cause of her death on January 26, 2022. I understand that, if I am convicted of or if I plead guilty or nolo contendere of any or all of the above-referenced crimes, the Board could charge my license with a violation of H.O. § 4-315(a)(4) ("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"). I also understand that, after the Board completes an independent investigation of the underlying facts, it is likely that the Board could additionally charge me with several other violations of the Act, including but not limited to H.O. § 4-315(a)(16) ("Behaves dishonorably or unprofessionally, or violates a professional code of ethics pertaining to the dentistry profession").

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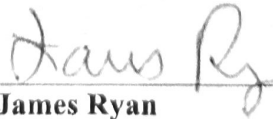
I understand that, if this matter were charged by the Board and proceeded to an evidentiary hearing before the Board, there likely is sufficient evidence to find and conclude as a matter of law that I violated H.O. §§ 4-315(a)(4) and (16) and I understand that the Board could sanction my license as authorized H.O. § 4-315, including the revocation of my license. Thus, it is my desire to surrender my license to practice as a dentist at this time.

In executing this agreement to surrender my license to practice as a dentist to the Board, I agree that I will not apply for reinstatement for a period of **TWO (2) YEARS** following the date of the Board's acceptance of this Letter of Surrender. I also agree that if, after a period of **TWO (2) YEARS**, I decide to apply for reinstatement as a dentist in Maryland, I will approach the Board in the same posture as an unregistered individual whose license has been revoked. In considering my application for reinstatement, the Board may review my entire Board file, including any information the Board receives after execution of this letter. I understand that it will be my burden, as an applicant for reinstatement, to demonstrate that I meet all of the Board's requirements for reinstatement of my license at the time I submit a reinstatement application. I understand that if the Board reinstates my license, it will be reinstated through the Board's disciplinary process and that my license will only be reinstated by the Board's issuance of a public order of reinstatement and that the Board may, in its discretion, place my reinstated license on probation subject to terms and conditions.

I wish to make it clear that I have voluntarily, knowingly, and freely chosen to submit this Letter of Surrender. I understand that, by executing this Letter of Surrender, I am waiving the right, now and in the future to any evidentiary hearing at which I would have the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, to contest the facts summarized in the second paragraph of this Letter of Surrender and at which I would have the right to all other substantive and procedural protections provided by law, including the right to appeal.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. I understand the nature and effect of both the Board's actions and this Letter of Surrender fully. Finally, I wish to make clear that I have had an opportunity to discuss this matter with legal counsel and I willingly, knowingly and voluntarily sign this letter of surrender.

Sincerely,

  
\_\_\_\_\_  
**James Ryan**

4/5/22  
**Date**

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NOTARIZATION

I HEREBY CERTIFY that on this 5th day of April, 2022,  
before me, Notary Public of the State and City/County aforesaid, **James Ryan** personally  
appeared, and made oath in due form of law that signing the foregoing Letter of Surrender was  
the voluntary act and deed of **James Ryan**.

AS WITNESSETH my hand and notarial seal.

SEAL

*Chloe Brown*  
Notary Public


My Commission Expires: 11/26/22

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**ACCEPTANCE**

**ON BEHALF OF THE MARYLAND STATE BOARD OF DENTAL EXAMINERS**, on  
this 21<sup>st</sup> day of April, 2022, I accept **James Ryan's** public Letter of Surrender  
of his license to practice as a dentist in the State of Maryland.

4/21/22  
Date



Arpana Verma, D.D.S., President  
Maryland State Board of Dental Examiners