## Aronda R. Jones, D.D.S. 3362 North Avenue 314 Oklahoma City, Oklahoma 73145

Francis X. McLaughlin, Jr.
Executive Director
Maryland State Board of Dental Examiners
SPRING GROVE HOSPITAL CENTER
Benjamin Rush Building Spring Grove
55 Wade Ave/Tulip Dr.
Catonsville, Maryland 21228

FEB 1 8 2020

DOARD OF DENTAL EXAMINERS

Re:

**Surrender of Dental License** 

License Number: 15123

Case Number: 2017 – 105, 2017 – 141, 2017 – 149 & 2018 – 068

Dear Francis McLaughlin and members of the Board:

Please be advised that as of the effective date of this letter, January 30, 2020, I have decided to surrender my license to practice dentistry in the State Maryland, License Number 15123 (D.O.B. 02-06-67). I understand that: I may not give dental advice or treatment to any individual, with or without supervision and/or compensation, cannot prescribe medications or otherwise engage in the practice of dentistry as it is defined in Maryland Dentistry Act (the "Act"), Md. Code Ann, Health Occupation. ("HO.") §§4-101, et seq. 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.

My decision to surrender my license to practice dentistry in the State Maryland has been prompted by my health, decision to retire and the Notice of Intent to Revoke Dental Licensure (the "Notice") and an unexecuted Final Order (the "Order"). The Notice is issued pursuant to the Maryland Dentistry Act (the "Act"0, codified at Md. Code Ann., Health Occ. §§4 – 101 et seq. (2014 Repl. Vol.), which permits that State Board of Dental Examiners (the "Board") to revoke your license, and the allegations contained therein. The Board's investigation resulted in the issuance of the Summary Revocation Order dated January 13, 2020, which is incorporated herein.

I do not admit to, nor do I deny that the Board has sufficient basis for finding the allegations in the Summary Revocation Order however, I waive any right to contest the underlying investigation or any findings the Board made in connection with the underlying investigation as referenced therein.



Letter to Francis X. McLaughlin and Members of the Board

Re: Aronda R. Jones, DDS, Surrender of Dental License Page 2

I affirm that I was served with a copy of the Summary Revocation documents and have otherwise been advised of the Board's actions through communication with representatives of the Board, including Assistant Attorney General, K.F. Michael Kao, Assistant Attorney General Administrative Prosecution & Litigation Division.

I have decided to surrender my license to practice dentistry in Maryland to avoid further prosecution resulting from aforementioned investigation and based on my decision to retire from the practice of dentistry, in the state of Maryland. In so agreeing, the Board will not proceed on a prosecution of this matter nor will it file charges as a result of the allegations contained in the January 13, 2020, Order for Summary Revocation. I wish to make clear that I have voluntarily, knowingly and freely chosen to submit this Letter of Surrender to avoid prosecution resulting from the aforementioned investigation and because of my decision to retire. With respect to proceedings involving the Board only, I understand that by executing this Letter of Surrender, I am waiving any right to contest these 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 to all other substantive and procedural protections provided by law, including the right to appeal.

I affirm that I have no current Maryland Controlled Dangerous Substances Registration Certificate, and no current United States Drug Enforcement Administration ("DEA") Certificate for the State of Maryland.

I further recognize and agree that by agreeing to this Letter of Surrender that my license will remain surrendered forever. In other words, I agree never to apply for reinstatement of my license in the State of Maryland. In the event that I violate the terms of this letter and apply for reinstatement of my Maryland dental license or for the issuance of a new Maryland dental license, I understand that the Board may deny such application based solely on the findings of facts and conclusions of law contained in the Notice of Intent to Revoke Dental Licensure (the "Notice") and an unexecuted Final Order (the "Order"), dated January 13, 2020.

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 regarding the proceedings before the Board, I have freely and voluntarily, of my own decision and volition, chosen to execute this letter. I understand both the nature of the Board's actions and this Letter of Surrender fully. I acknowledge that I understand and comprehend that language, meaning and terms and effect of this Letter of Surrender. I make this decision knowingly and voluntarily.

Letter to Francis X. McLaughlin and Members of the Board

Aronda R. Jones, D.D.S., Surrender of Dental Re:

License Page 3

## **NOTARY PUBLIC**

STATE OF OKLAHOMA

CITY/COUNTY OF OKlahoma City

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I HEREBY CERTIFY that on this Ol day of January, 2020, before me, a Notary Public of the State and City/County aforesaid, personally appear Aronda R. Jones, D.D.S., and declared and affirmed under the penalties of perjury that signing the foregoing Letter of Surrender was her voluntary act and deed.

AS WITNESS my hand and Notarial seal.

My Commission expires: 09/26/2020

Sincerely,

Aronda R. Jones, D.D.S.

Letter to Francis X. McLaughlin and Members of the Board

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## **ACCEPTANCE**

On this 19 day of February, 2020, I, Francis X. McLaughlin, on behalf of the Maryland State Board of Dental Examiners, accept Aronda R. Jones PUBLIC SURRENDER of her license to practice dentistry in the State of Maryland.

Francis X. McLaughlin

**Executive Director** 

Maryland State Board of Dental Examiners