

IN THE MATTER OF

\* BEFORE THE

RYAN BALL, R.PH

\* MARYLAND STATE

Respondent-Pharmacist

\* BOARD OF PHARMACY

LICENSE NUMBER: 20756

\* Case Number: 25-170

\* \* \* \* \*

**CONSENT ORDER**

On July 16, 2025, the Maryland State Board of Pharmacy (the “Board”) charged RYAN BALL (the “Respondent-Pharmacist”), License Number: 20756, under the Maryland Pharmacy Act, (the “Act”) Md. Code Ann., Health Occ. §§ 12-101 *et seq.* (2021 Repl. Vol. & 2024 Supp.).

The Board charged the Respondent-Pharmacist with violating the following provisions of Md. Code Ann., Health Occupations (“Health Occ.”):

**Health Occ. § 12-313. Denials, reprimands, suspensions, and revocations—Grounds.**

....

- (b) Subject to the hearing provisions of § 12-315 of this subtitle, the Board, on the affirmative vote of a majority of its members then serving, may . . . reprimand any licensee, place any licensee on probation, or suspend or revoke a license of a pharmacist if the licensee:

...

- (15) Dispenses any drug, device, or diagnostic for which a prescription is required without a written, oral, or electronically transmitted prescription from an authorized prescriber;
- (22) 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;

- (24) Is disciplined by a licensing or disciplinary authority of any state or country or convicted or disciplined by a court of any state or country for an act that would be grounds for disciplinary action under the Board's disciplinary statutes;

- (25) Violates any rule or regulation adopted by the Board[.]

The Board charged the Respondent-Pharmacist with violating the following provisions of the Code of Maryland Regulations (“COMAR”):

**COMAR 10.34.10.01. Patient Safety and Welfare.**

**A. A pharmacist shall:**

- (1) Abide by all federal and State laws relating to the practice of pharmacy and the dispensing, distribution, storage, and labeling of drugs and devices, including but not limited to:
  - (a) United States Code, Title 21,
  - (b) Health-General Article, Titles 21 and 22, Annotated Code of Maryland,
  - (c) Health Occupations Article, Title 12, Annotated Code of Maryland,
  - (d) Criminal Law Article, Title 5, Annotated Code of Maryland, and
  - (e) COMAR 10.19.03;

**B. A pharmacist may not:**

- (1) Engage in conduct which departs from the standard of care ordinarily exercised by pharmacist;
- (2) Practice pharmacy under circumstances or conditions which prevent

the proper exercise of professional judgment; or

- (3) Engage in unprofessional conduct.

**COMAR 10.34.10.07. Disposition and Return of a Prescription Drug or Device**

B. A pharmacist may not:

- (2) Sell, give away, or otherwise dispose of a drug, drug accessory, chemical, or device if the pharmacist knows or should know that the drug, drug accessory, chemical, or device is to be used in an illegal activity.

On August 13, 2025, a Case Resolution Conference ("CRC") was held before a panel of the Board. As a resolution of this matter, the Respondent-Pharmacist agreed to enter this public Consent Order consisting of Findings of Fact, Conclusions of Law, and Order.

**FINDINGS OF FACT**

The Board finds:

1. At all times relevant hereto, the Respondent-Pharmacist was licensed to practice as a pharmacist in the State of Maryland. The Respondent-Pharmacist was first licensed as a pharmacist in Maryland on or about July 18, 2012. The Respondent-Pharmacist's license expires on May 31, 2026.

2. At all times relevant hereto, the Respondent-Pharmacist was employed as a pharmacist at a hospital ("the Hospital")<sup>1</sup> located in Maryland.

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<sup>1</sup> For confidentiality and privacy purposes, the names of individuals and facilities involved in this case are not disclosed in this document. Upon written request, the Administrative Prosecutor will provide the information to the Respondent.

## **The Complaint**

3. On or about October 30, 2024, the Board received an email from Director of Pharmaceutical Services at the Hospital stating that the Respondent-Pharmacist was terminated from the Hospital on October 8, 2024 “due to theft of rocuronium<sup>2</sup> and succinylcholine<sup>3</sup>.”

4. The email further explained that there was “an ongoing criminal investigation in ... Maryland related to the death of Ryan’s dog. It is suspected that Ryan removed the supply of...medications and administered rocuronium to his dog”. According to the email, the toxicology report for the dog confirmed elevated levels of rocuronium.

## **Police Investigation**

The Board obtained a copy of the police investigation via subpoena. A review of the records revealed:

5. According to the Incident Report, on July 17, 2024, police responded to the caller’s (“Neighbor 1”) residence for a suspicious incident/found property report. Neighbor 1 advised that his neighbor (“Neighbor 2”) discovered and retrieved a clear plastic bag containing needles and possible controlled dangerous substances from the bottom of her trashcan when she brought it back from the street.

6. Police on scene recovered the following items:

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<sup>2</sup> Rocuronium is a neuromuscular blocking agent. Rocuronium and other similar drugs are administered intravenously during some surgical procedures as part of a comprehensive anesthetic plan to facilitate tracheal intubation and to relax skeletal muscles during surgery. Neuromuscular blocking agents can decrease breathing and other vital processes to the extent that death will ensue if ventilation is not supported.

<sup>3</sup> Succinylcholine is also a neuromuscular blocking agent for short-term muscle relaxation during surgical procedures.

- a. one (1) glass clear container with a red cap labeled "Succinylcholine" and "paralyzing agent" with clear liquid inside,
- b. one (1) empty glass container with a worn off label that said "para" and a yellow cap which said "paralyzing agent",
- c. three (3) needles still in their packaging,
- d. one (1) opened paper needle package,
- e. one (1) clear syringe, and
- f. one (1) empty plastic needle cover.

7. According to the Incident Report, Neighbor 1 informed officers:

He then realized that the neighbor who resides at [Respondent's address] had a family dog that unexpectedly passed away Monday morning. [Neighbor 1] stated that the [Respondent] does not like the family dog. [Neighbor 1] stated [the Respondent] keeps the dog locked in the basement and when the wife is out of town, the dog is usually chained up outside all day and all night. [Neighbor 1] stated that **the [Respondent] has made it well known to the neighborhood that he does not like the family dog.** [Neighbor 1] further advised [the officer] that **the [Respondent] is a pharmacist and the items found in [Neighbor 2's] trash can typically are only prescribed by a pharmacist.** [Neighbor 1] stated that he confronted the [Respondent] and said that he was sorry to hear the passing of the family dog. [Neighbor 1] further stated he told the [Respondent] about the items recovered from the trash can and warned the husband that someone may have poisoned the dog. [Neighbor 1] advised [Officer] that the [Respondent] made a comment like just because those items were found, why would that indicate his dog was poisoned. [Neighbor 1] then stated he was calling [police] to dispose of the items and made mention that the Forensics Unit would do an investigation. [Neighbor 1] then stated to [the Officer] **that the [Respondent] said something along the lines of how his job would be in jeopardy.** [Neighbor 1] stated that the [Respondent] seemed uneasy and nervous during the interaction. [Emphasis added]

8. Both Neighbor 1 and the responding police officer contacted animal control who assisted in the investigation.
9. According to the Incident Report's Supplemental Narrative:

On Monday July 22, 2024, Animal Control Manager (“ACM”) reported the following: On the above-mentioned date ACM made contact with [Respondent’s Spouse] . . . [Respondent’s Spouse] is the owner of [Dog] a Plott Hound type dog male 6 years old. . . On Monday 7/15/24 she left for a work trip in Ohio and later that same day her husband [the Respondent] contacted her, stating that the dog passed away. When asked about her husband’s relationship with the dog, she stated that she was not going to comment, and she would possibly need to speak to an attorney[.]

10. A later Supplemental Narrative contained the following:

ACM stated he was able to locate that Mr. Ball had contacted local vet [Vet 1] inquiring if they would be able to cremate the family dog and had transported the dog to the veterinary clinic for the cremation. ACM advised that he contacted the veterinary clinic and was advised the dog was brought in by Mr. Ball and that [Dog] was not a patient at the clinic. ACM advised that he was able to intercept [Dog] prior to cremation and that he transported [Dog] to [University 1] for a necropsy.

ACM advised that upon [University 1] performing the necropsy, they located what they suspected to be an injection site. ACM explained that [University 1] did not have the means to complete a chemical analysis on [Dog’s] blood work or injection site and request that [University 2] be contacted to see if they had the means to conduct the analysis.

11. According to the Autopsy Summary Report dated October 24, 2024, University 1 and University 2 determined:

**In summary, the autopsy findings are consistent with death due an overdose of rocuronium, a neuromuscular blocking agent. Rocuronium and other drugs of this class are administered intravenously during some surgical procedures as part of a comprehensive anesthetic plan to facilitate tracheal intubation and to relax skeletal muscles during surgery. Neuromuscular blocking agents can decrease breathing and other vital processes to the extent that death will ensue if ventilation is not supported. Administration of rocuronium outside of the context of a surgical procedure with anesthesia and ventilatory support would**

**generally be considered inappropriate.** This dog had no recent history of surgery or anesthesia. . .

**The presence of rocuronium in the tissues at any detectable level outside of the scope of anesthesia is strongly indicative of death due to non-natural cause. The concentrations of rocuronium in the blood were similar to those reported in humans under full surgical anesthesia with ventilatory support.** This blood concentration of rocuronium in an unsupported patient would likely have resulted in complete or near-complete neuromuscular paralysis with subsequent respiratory failure and death within several minutes of intravenous injection[.] [Emphasis added]

12. When Hospital officials learned of the investigation involving the Respondent-Pharmacist, the Director of Pharmaceutical Services reviewed photographs of the vials recovered from the trashcan and explained to police that on the succinylcholine vial, there is a worn label in red writing which matches the label designed in-house at the Hospital. She also explained that the barcode on the label is the National Drug Code (NDC) and the Hospital purchased NDCs associated with rocuronium and succinylcholine. She confirmed the Respondent worked July 8 through July 13, 2024. The Respondent-Pharmacist's normal schedule would have included Monday July 14, 2024, from 6:00 a.m.to 6:00 p.m., but he took leave that day, which he requested on July 3, 2024.

13. On September 19, 2024, police conducted a recorded interview of Neighbor 1. On Tuesday July 16, 2024, Neighbor 2 contacted him and advised that she found suspected drugs in her trashcan Monday evening; and she sent him a photograph. According to Neighbor 1, after he took possession of the suspected drugs from Neighbor 2, he spoke with the Respondent-Pharmacist's spouse via text message, and she responded that her home camera system was wiped clean. The Respondent-Pharmacist's spouse stated

the Respondent-Pharmacist was upset with her and went out drinking Sunday evening, and “she wouldn’t usually think that [the Respondent] would have harmed [the dog], but she wasn’t sure.” Neighbor 1 told police he spoke with the Respondent and his spouse on July 16, 2024, at their residence, and he informed them about finding the suspected drugs. He told police the Respondent would not make eye contact with him, and his bottom lip was quivering. Neighbor 1 suggested the Respondent and his spouse report the dog’s death to animal control, but the Respondent said he did not think they would report it because he would “get in trouble by his job.” According to Neighbor 1, he last saw the dog alive on the evening of July 14, 2024.

14. On October 1, 2024, police conducted a recorded interview with Neighbor 2 who stated that trash pick-up occurs on Monday mornings and that she took her trash to the end of her driveway on July 14, 2024, before working a double shift the next day from 6:00 a.m. to 6:00 p.m. When she arrived home at approximately 7:00 p.m. she brought in her trash can and checked the can for any remaining food as she routinely does. After she located a Ziploc-style bag with packets for cleaning and a vial with a label marked “par” containing a syringe, Neighbor 2 removed the items from the can and took a photograph. According to Neighbor 2, her trashcan was full that evening and the items must have been placed after the trash was picked up that morning.

15. During a text-message conversation with Neighbor 2, the Respondent-Pharmacist’s spouse said she left her residence on July 15, 2024, at 6:15 a.m. and the Respondent took the children to camp between 8:15 and 8:30 a.m. Neighbor 2 previously offered to find another home for the dog and the Respondent-Pharmacist’s spouse said she

would talk to the Respondent before making a decision. The Respondent-Pharmacist's spouse never responded.

### **Criminal Charges**

16. On February 5, 2025, the Respondent-Pharmacist was indicted in the Circuit Court for Harford County, Maryland, on aggravated animal cruelty, obtaining a prescription by fraud, animal killing, and theft. (Case No. C-12-CR-25-000118).

17. On July 1, 2025 the Respondent-Pharmacist tendered a guilty plea to aggravated animal cruelty (a felony). The Court sentenced him to three years' incarceration with all but one year suspended and credited him for time served. He also pled guilty to obtaining a prescription by fraud and received a fully suspended two-year consecutive sentence. He will remain on supervised probation for three years from the date of release.

### **CONCLUSIONS OF LAW**

Based on the foregoing Findings of Fact, the Board concludes as a matter of law that the Respondent-Pharmacist's actions, including those mentioned above, constitute violations of Health Occ. §§ 12-313(b)(2), (15), (22), (24), and/or (25), and/or COMAR 10.34.10.01(A)(1) and (B)(1)-(3), and COMAR 10.34.10.07(B)(2).

### **ORDER**

Based on the foregoing Findings of Fact and Conclusions of Law, on the affirmative vote of a majority of the Board, it is hereby:

**ORDERED** that the Respondent-Pharmacist's license to practice pharmacy in the State of Maryland is hereby **REVOKED** for a minimum of three years from the effective date of this Order; and it is further

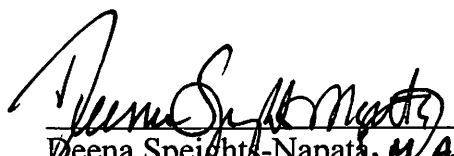
**ORDERED** that the Respondent-Pharmacist may apply for reinstatement after three years from the effective date of this Order and shall provide all documentation of his rehabilitation and treatment in his reinstatement application; and it is further

**ORDERED** that in the event that the Respondent petitions for reinstatement of his pharmacist license, the Board has full discretion to grant or deny the reinstatement. If the Board grants reinstatement, it may impose any terms and conditions the Board considers appropriate for public safety and the protection of the integrity and reputation of the profession; and it is further

**ORDERED** that the Respondent-Pharmacist shall bear the cost(s) of complying with the Consent Order; and it is further

**ORDERED** that this Consent Order is a public document. *See Md. Code Ann., Gen. Prov. § 4-101 et seq. (2019 Repl. Vol. & 2024 Supp.).*

10-6-25  
Date

  
Deena Speights-Napata, M.A.  
Executive Director for  
Kristopher Rusinko, PharmD  
President, Board of Pharmacy

## CONSENT

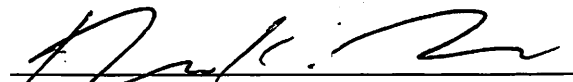
I, Ryan Ball, acknowledge that I have had the opportunity to consult with legal counsel before signing this document. By this Consent, I accept to be bound by this Consent Order and its conditions and restrictions. I waive any rights I may have had to contest the Findings of Fact and Conclusions of Law.

I acknowledge the validity of this Consent Order as if entered into 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 acknowledge the legal authority and the jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I also affirm that I am waiving my right to appeal any adverse ruling of the Board that might have followed any such hearing.

I sign this Consent Order without reservation, and I fully understand and comprehend the language, meaning and terms of this Consent Order. I voluntarily sign this Order and understand its meaning and effect.

10/2/25  
Date

  
Ryan Ball

NOTARY

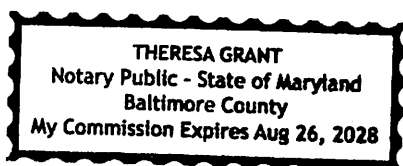
STATE OF Maryland

CITY/COUNTY OF Baltimore

I hereby certify that on this 2<sup>nd</sup> day of October, 2025, before me, a Notary Public of the State of Maryland and City/County aforesaid, personally appeared RYAN BALL and made an oath in due form that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS, my hand and Notary Seal.

Theresa Grant  
Notary Public



My commission Expires: 8/26/28