

IN THE MATTER OF

\*

BEFORE THE

DENNIS P. LEE.

\*

MARYLAND STATE

Respondent

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BOARD OF PHARMACY

License Number: 07488

Case Number: 13-040

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**ORDER FOR SUMMARY SUSPENSION**

Pursuant to Md. State Govt. Code Ann. § 10-226(c) (2009 Repl.Vol. & 2012 Supp.), the Maryland Pharmacy Act (the "Act"), Md. Health Occ. Code Ann. §§ 12-101 *et seq.* (2009 Repl. Vol. & 2012 Supp.), and Code Md. Regs. tit. 10, § 34.01.12, the State Board of Pharmacy (the "Board") hereby summarily suspends the pharmacy license of **DENNIS P. LEE, License Number 07488 (the "Respondent") (D.O.B.: 08/09/1947)**, to practice pharmacy under the Act. This Order is based on the following investigative findings, which the Board has reason to believe are true:<sup>1</sup>

**FINDINGS OF FACT**

1. The Respondent is registered to practice pharmacy in the State of Maryland under License Number 07488. The Respondent was first licensed on December 1, 1971. The Respondent's license is active and is scheduled to expire on August 13, 2014.
2. At all times relevant hereto, the Respondent was employed as a pharmacist in the outpatient oncology department of Hospital A in Baltimore, Maryland.<sup>2</sup>

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<sup>1</sup> The statements regarding the Respondent's conduct are intended to provide the Respondent with notice of the Board's charges. They are not intended as, and do not necessarily represent a complete description of the evidence, either documentary or testimonial, to be offered against the Respondent in connection with this matter.

<sup>2</sup> The names of individuals and facilities are confidential. The Respondent may obtain them upon request to the Administrative Prosecutor.

3. In November 2012, hospital pharmacy staff discovered that the Respondent had ordered a bottle of cough syrup containing guaifenesin, an expectorant, and codeine, a Controlled Dangerous Substance ("CDS"), for the outpatient oncology area. The Respondent was on vacation at the time of the discovery.
4. The Pharmacy Supervisor determined that no outpatient oncology patient had been administered the cough syrup. In addition, neither the oncology pharmacist nor the nursing staff knew where the cough syrup was being stored.
5. On November 15, 2012, upon the Respondent's return from vacation, the Pharmacy Director, Pharmacy Supervisor and Director of Oncology met with him to discuss the ordering of CDS in the out-patient oncology department.
6. During the meeting, the Respondent acknowledged that he had ordered on the oncology department account a bottle of the narcotic cough syrup. The Respondent stated that he had had a cough before leaving for his vacation and had ordered the cough syrup before he left. The Respondent further stated that he had taken the bottle of cough syrup with him on vacation in case he needed it.
7. Upon further questioning, the Respondent affirmed that he had consumed some of the cough syrup while on vacation, noting that "at least it was not hydrocodone."
8. The Respondent acknowledged that he had shown poor judgment when ordering on the hospital account narcotic cough syrup for his personal use. The Respondent asked if he would be fired.
9. Later on November 15, 2012, the Respondent submitted his resignation from Hospital A.

10. The Oncology Department Director instructed the Respondent to report to the Occupational Health Office for a Urine Drug Screen (“UDS”), to not discuss the matter with anyone else and to await further instructions.
11. The results of the Respondent’s UDS indicated a positive result for two different substances.<sup>3</sup>
12. The Respondent was placed on administrative leave and was referred by Hospital A to the Pharmacists’ Education and Advocacy Council (“PEAC”).
13. Thereafter, hospital staff determined that, contrary to the Respondent’s claim that he had ordered narcotic cough syrup for his personal use on only one occasion, he had, in fact, placed orders for 16 bottles of cough syrup with codeine over the ten-month period from January 2012 through October 2012.
14. The Respondent failed to disclose truthfully to his supervisors that he had placed orders for narcotic cough syrup on multiple occasions. Furthermore, he failed to make a full and truthful disclosure of his conduct to the Occupational Health Office and to PEAC.
15. On or about December 5, 2012, Hospital A terminated the Respondent for violation of hospital policies including: unauthorized theft of property; falsification of hospital records or other dishonesty associated with employment; reporting for work under the influence of an intoxicant, narcotic or other drugs that may affect performance and consumption, distribution, possession or use of intoxicants, narcotics, or other drugs that may affect performance on Hospital A premises.

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<sup>3</sup> The names of the two substances are not identified in Hospital A’s investigatory file.

## CONCLUSIONS OF LAW

Accordingly, the Board concludes that the public health, safety or welfare imperatively requires emergency action in this case, pursuant to Md. State Gov't Code Ann. § 10-226(c)(2)(i) (2009 Repl. Vol. & 2012 Supp.)

### ORDER

Based on the foregoing, it is this 20<sup>TH</sup> day of March, 2013, by a majority vote of a quorum of the Board, hereby:

**ORDERED** that pursuant to the authority vested by Md. State Gov't Code Ann. § 10-226(c)(2)(i), the Respondent's license to practice pharmacy in Maryland is hereby **SUMMARILY SUSPENDED**; and it is further

**ORDERED** that the Respondent must request a post-deprivation show cause hearing in writing **WITHIN 30 DAYS** of his receipt of this notice. The written request should be made to: LaVerne Naesea, Executive Director, Maryland Board of Pharmacy, Department of Health and Mental Hygiene, 4201 Patterson Avenue, Baltimore, Maryland 21215, with copies mailed to: Victoria H. Pepper, Assistant Attorney General, Office of the Attorney General, 300 West Preston Street, Suite 207, Baltimore, Maryland 21201, and Linda Bethman, Assistant Attorney General, Office of the Attorney General, 300 West Preston Street, Suite 302, Baltimore, Maryland 21201; and it is further

**ORDERED** that if the Respondent fails to request a post-deprivation show cause hearing, the Respondent's license will remain suspended; and it is further

**ORDERED** that the Respondent shall immediately turn over to the Board all copies of his license to practice pharmacy issued by the Board; and it is further

**ORDERED** that this document constitutes an Order of the Board and is therefore a public document for purposes of public disclosure, as required by Md. State Gov't Code Ann. § 10-617(h)(2009 Repl. Vol. & 2012 Supp.).

A handwritten signature in black ink, appearing to read 'Michael N. Souranis', written over a horizontal line.

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Michael N. Souranis, P.D.  
President  
Maryland Board of Pharmacy