Date

Lenna Israbian-Jamgochian, Pharm. D.
President
Board of Pharmacy
4201 Patterson Avenue
Baltimore, Maryland 21215

Re: Surrender of Pharmacist License
License Number: 07911
(Case Number:) 14-029

Dear Dr. Israbian-Jamgochian and Members of the Board:

Please be advised that I have decided to surrender my license to practice pharmacy in the State of Maryland, License Number 07911. I understand that I may not give pharmacy advice or treatment to any individual, with or without supervision and/or compensation, or otherwise engage in the practice of pharmacy as it is defined in the Pharmacy Practice Act (the "Act"), Md. Health Occ. ("H.O") Code Ann. §§12-101, et seq. (2014 Repl. Vol.). In other words, as of November 10, 2014 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.

I understand that this Letter of Surrender is a PUBLIC document.

My decision to surrender my license to practice pharmacy in Maryland has been prompted by an investigation of my licensure by the Maryland Board of Pharmacy (the "Board").

The Board's investigation resulted in Charges under the Act. Specifically, the Board charged me with the commission of prohibited acts under H.O. §12-313:

(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 deny a license to any applicant, reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the applicant or licensee:
(2) Fraudulently or deceptively uses a license;

(8) Willfully fails to file or record any report that is required by law;

(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;

(21) Is professionally... incompetent;

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

The Board further charged me with a violation of its Pharmacist and Pharmacy Technician Code of Ethics, Code Md. Regs. (COMAR) tit.10. § 34.10. (November 12, 2001):

.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:
Lenna Israbian-Jamgochian, Pharm. D., President
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(1) Engage in conduct which departs from the standard of care ordinarily exercised by a pharmacist;
(3) Engage in unprofessional conduct

The basis for the Charges was that I filled two prescriptions that were not from an authorized prescriber and self-medicated without a prescription. I affirm that I was served with a copy of the charging document and have otherwise been advised on the Board’s actions through communications with representatives of the Office of the Attorney General and my legal counsel.

I have decided to surrender my license to practice pharmacy in Maryland to avoid further prosecution of the aforementioned charges. The basis for the Charges against me include the findings of the investigations described above, and by virtue of this Letter of Surrender, I waive any right to contest those charges and findings. 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 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 hereby affirm that I have terminated any practice that I had in Maryland.

I acknowledge that on or before the effective date of this Letter of Surrender, I shall present to the Board my Maryland pharmacist license, number 07911, including any renewal certificates and wallet-sized renewal cards.

I further recognize and agree that, by agreeing to this Letter of Surrender, my license will remain surrendered until such time as I apply for reinstatement and comply with the terms and conditions set forth in this Letter and those determined by the Case Resolution Conference and/or the Board subsequent to my application for reinstatement. In the event that I apply for reinstatement of my Maryland license or for the issuance of a new Maryland pharmacist license, I understand that the Board may set terms and conditions that shall apply to my receiving a reinstated pharmacist license or a new Maryland pharmacist license. I also understand that if I apply for reinstatement or for a new Maryland pharmacist license that I bear the burden of demonstrating to the Board that I am competent to practice pharmacy and possess good moral character, as specified in Md. Health Occ. Code Ann. §§ 12-101, et seq. (2014 Repl.Vol.). I understand that if I determine that if I would like once again to
practice pharmacy in Maryland, I will approach the Board in the same posture as one whose license has been revoked on the above charges.

I understand that if I petition the Board for reinstatement of my license, the Board will review my case and determine my fitness to have my license reinstated. I understand that the Board can deny such application based solely on the allegations contained in the Charges dated August 20, 2014 and/or any findings of the (nature of violation) investigation by the Board. I understand that the Board will only consider my petition for reinstatement if I have first met the following conditions:

A. I would have to take and pass the Multi-State Pharmacy Jurisprudence Examination (MPJE);

B. I shall comply with obtaining the requisite Continuing Educational Units (CEUs) needed for renewal;

If I meet the above conditions, the Board may place me on Probation for a period of three years, subject to conditions set by the Board.

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 consulted with an attorney before signing this Letter of Surrender. 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.

Sincerely,

Gary Shafer, P.D.

Read and approved:

Justin Gregory, Esquire,
Attorney for the Respondent
Lenna Israbian-Jamgochian, Pharm. D., President
and Members of the Board
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NOTARY

STATE OF Maryland
CITY/COUNTY OF Garrett

I HEREBY CERTIFY that on this 15th day of November, 2014,
before me, Chas D. Parker, a Notary Public of the State and City/Country
aforesaid, personally appeared Gary Shafer, and declared and affirmed under the
penalties of perjury that signing the foregoing Letter of Surrender was his voluntary act
and deed.

AS WITNESS my hand and notarial seal.

[Signature]
Notary Public

My Commission expires: 7/28/15
ACCEPTANCE

ON BEHALF OF THE BOARD OF PHARMACY, on this 19th day of November, 2014, I accept Gary Shafer's public Letter of Surrender of his license to practice pharmacy in the State of Maryland.

Lenna Israbian-Jamgochian, Pharm. D.
President
State Board of Pharmacy

Enclosure

cc: John S. Nugent, Principal Counsel
    Roberta Gill, AAG, Administrative Prosecutor
    Linda Bethman, AAG, Board Counsel
    Brett Felter, AAG, Board Counsel
    YuZon Wu, P.D, Compliance Coordinator
    Vanessa Thomas-Gray, Compliance Investigator
    Courtney Jackson, Compliance Secretary
    Rosalind Spellman, Administrative Officer