Dennis P. Lee 6 Lochmoor Court Lutherville, Maryland 21093

Date: MARCH 30, 2013

Michael N. Souranis, P.D. President Maryland Board of Pharmacy 4201 Patterson Avenue Baltimore, Maryland 21215

RE: Surrender of License to Practice Pharmacy

License Number: 07488 Case Number: 13-040

Dear Mr. Souranis and Members of the Board:

I have decided to **SURRENDER** permanently my license to practice pharmacy in the State of Maryland, License Number 07488.

I understand that upon surrender of my license, I may not practice pharmacy with or without supervision and/or compensation as it is defined in the Maryland Pharmacy Act (the "Act"), Md. Health Occ. Code Ann. ("H. O.") § §12-101 et seq. (2009 Repl. Vol. & 2012 Supp.). In other words, I understand that the surrender of my license means that I am in the same position as an unlicensed individual.

This Letter of Surrender shall become effective immediately upon the date of acceptance by the Maryland Board of Pharmacy (the "Board"). I understand that this Letter of Surrender is a **PUBLIC** document and on the Board's acceptance becomes a **FINAL ORDER** of the Board.

My decision to surrender my license to practice pharmacy in Maryland has been prompted by an investigation of my license by the Board that confirmed that I had engaged in the unauthorized theft from my former employing hospital of multiple bottles of cough syrup with codeine and failed to truthfully disclose my conduct to my employer.

My decision to surrender my license has been prompted by my desire to avoid further prosecution of the disciplinary charges now pending before the Board.

I acknowledge that the Board initiated an investigation of this matter.

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Pursuant to that investigation, the Board, on March 20, 2013, issued an Order for Summary Suspension of my license. A copy of the Order for Summary Suspension is attached hereto.

I agree that if the Board were to proceed with the prosecution of this matter, the State would be able to prove the charges, as alleged in the Order for Summary Suspension, by a preponderance of evidence. I agree to waive any right to contest the underlying investigation or the Board's findings in connection with its underlying investigation.

I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Letter of Surrender to avoid prosecution of the charges under the Act and the Board's regulations. I understand that by tendering this Letter of Surrender, I am waiving any right to contest the findings of the Board's investigation 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 understand that the Board will advise the Health Care Integrity Data Bank and any other required entities of this Letter of Surrender and in any response to inquiry, will advise that I have surrendered my license. I understand that this Letter of Surrender will be posted on the Board's website along with all other formal disciplinary actoins. I also understand that, in the event I would apply for licensure in any form in any other state or jurisdiction, that this Letter of Surrender, and all underlying documents, may be released by the Board to the same extent as a Final Order that would result from disciplinary action, pursuant to Md. State Gov't. Code Ann § 10-611 et seq. (2009 Repl. Vol. & 2011 Supp.). Finally, I understand that this Letter of Surrender is considered disciplinary action by the Board.

I agree that the effect of this Letter of Surrender is permanent, and that I will never seek licensure in the State of Maryland. I further agree that the Board Is not obligated to consider any application for reinstatement that I might file at a future date, and that I waive any hearing rights that I might possess regarding such application.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. 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.

Finally, I wish to make clear that I have been advised of my right to be represented by the attorney of my choice throughout proceedings before the

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Board, including the right to consult with an attorney prior to signing this Letter of Surrender. I understand both the nature of the Board's actions and thus 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,

Dennis P. Lee

NOTARY

STATE OF MARYLAND Baltimore

1 HEREBY CERTIFY that on this 30 day of Macconduction, 2013, before me, a Notary Public of the State and City/County aforesaid, personally appeared Dennis P. Lee., 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.

Notary Public

My Commission expires: $1/-19 \cdot 2015$

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ACCEPTANCE

President

Maryland Board of Pharmacy

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On behalf of the Maryland Board	d of Pharmacy on this day
of, 2013 , I ac	ccept Dennis P. Lee's PUBLIC
SURRENDER of his license to practice	pharmacy in the State of Maryland.
for	Michael N. Souranis, P.D.