

Marsha M. Meyer, P.T.  
10908 Battersea Lane  
Columbia, Maryland 21044  
May 23, 2005

Margery Rodgers, P.T.  
Chair  
Maryland Board of Physical Therapy Examiners  
4201 Patterson Avenue  
Baltimore, Maryland 21215

RE: Permanent Surrender of License to Practice Physical Therapy  
License Number: 17311  
Case Number: 05-14

Dear Ms. Rodgers and Members of the Board:

I have decided to surrender **PERMANENTLY** my license to practice physical therapy in the State of Maryland, License Number 17311. I understand that upon surrender of my license, I may not give physical therapy treatment to any individual, with or without supervision and/or compensation, or otherwise engage in the practice of physical therapy as it is defined in the Maryland Physical Therapy Act (the "Act"), Md. Health Occ. Code Ann. ("H. O.") §§13-101 et seq. (2000 & 2004 Supp.), and under applicable law. In other words, as of May 23, 2005, 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 and on the Board's acceptance becomes a **FINAL ORDER** of the Board.

My decision to surrender my license to practice physical therapy in Maryland has been prompted by an investigation of my license by the Maryland Board of Physical Therapy Examiners (the "Board") including, but not limited to, allegations that I violated the Maryland Physical Therapy Act and the Consent Order into which I entered on September 23, 2003 in that I failed to practice in accordance with the laws and regulations governing the practice of physical therapy in Maryland. Specifically, the Board's investigation revealed that in 2004, while employed as a physical therapist by the Johns Hopkins Hospital Home Health Care Group ("JHHHCG"), I willfully submitted false reports and statements in the practice of physical therapy. I acknowledge that I willfully falsified patient notes by documenting that I had provided in-home physical therapy to patients when I had not done so. I also willfully falsified other documentation and caused false claims for payment to be submitted for physical therapy I did not provide. I further acknowledge that JHHHCG subsequently filed criminal charges against me (one count of theft less than \$500.00 and one count of uttering false documents) which the District Court of Maryland for Baltimore City steted on the

condition that I pay restitution in the amount of \$3,135.50 within thirty (30) days. I confirm that I paid the restitution in a timely manner.

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 and my poor health.

I agree that if the Board were to proceed with the prosecution of the charges in this matter, the State would be able to prove the charges, as alleged in the Charges Under the Maryland Physical Therapy Act, dated March 16, 2005, by a preponderance of the evidence. Specifically, the State would be able to prove that the I violated the Consent Order into which I entered on September 23, 2002 and the following provisions of the Maryland Physical Therapy Act, H.O. § 13-316:

- (12) Willfully makes or files a false report or record in the practice of physical therapy or limited physical therapy;
- (13) Willfully fails to file or record any report as required by law, willfully impedes or obstructs the filing or recording of the report, or induces another to fail to file or record the report;
- (14) Submits a false statement to collect a fee;
- (15) Violates any provision of this title or rule or regulation adopted by the Board;
- (19) Commits an act of unprofessional conduct in the practice of physical therapy or limited physical therapy;
- (25) Fails to meet accepted standards in delivering physical therapy or limited physical therapy care.

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.

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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 or published 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. (1999).

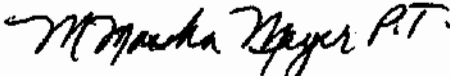
I hereby affirm that I do not maintain a physical therapy practice in Maryland.

I further acknowledge that on or before the effective date of this Letter of Surrender, I shall present to the Board my most recent Maryland physical therapy license, number 17311, including any renewal certificates and wallet-sized renewal cards.

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 Board, including the right to consult with an attorney prior to signing this Letter of Surrender. I fully understand both the nature of the Board's actions and this Letter of Surrender. I voluntarily chose to surrender my Maryland license to practice physical therapy pursuant to the terms and conditions specified herein.

Sincerely,


  
M. Marsha Meyer, P.T.

NOTARY

STATE OF MARYLAND  
CITY/COUNTY OF BALTIMORE

I HEREBY CERTIFY that on this 23 day of MAY, 2005, before me, a Notary Public of the State and City/County aforesaid, personally appeared M. Marsha Meyer, P.T., and declared and affirmed under the penalties of perjury that signing the foregoing Letter of Surrender was her voluntary act and deed.

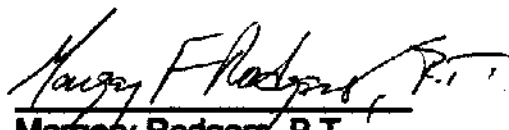
AS WITNESS my hand and Notarial seal.

  
LARRY SCHUYLER  
Notary Public

My Commission expires: MARCH, 2008

**ACCEPTANCE**

On behalf of the Maryland Board of Physical Therapy Examiners, on this  
25 day of May 2005, I accept M. Marsha Meyer's **PUBLIC**  
**PERMANENT SURRENDER** of her license to practice physical therapy in the  
State of Maryland.



**Margery Rodgers, P.T.**

**Chair**

**Maryland Board of Physical Therapy  
Examiners**